



MSc Occupational Therapy (Pre-Registration)

**Practice Education Handbook** 

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# 1. About this document

The Practice Education Handbook is for students and practice educators/supervisor. It provides essential information about practice-based learning in the MSc Occupational Therapy at Edinburgh Napier University. You may also wish to refer to:

- MSc Occupational Therapy Programme Handbook
- Mobility Placement Handbook

# 2. Practice Education at Edinburgh Napier University

Practice education, also called practice-based learning or placements, is a key part of the MSc Occupational Therapy (Pre-registration) curriculum. It is central to the MSc Occupational Therapy programme. Placements provide students with the opportunity to apply knowledge, theory and practice skills learned at university in the practice setting. Students are supported to develop their professional identity as an occupational therapist and apply guidance from the Royal College of Occupational Therapy (RCOT) Career Development Framework (2022).

During the programme, students will undertake four practice placements. Each of these is located within credit bearing modules and the placement component at SCQF Level 10 must be passed in addition to the module assignment component. Practice-based learning is a requirement for registering with the Health and Care Professions Council (HCPC) on graduation.

At Edinburgh Napier University, students from the Occupational Therapy, Physiotherapy and Social Work programmes will be on placement at the same time, at the end of each year on the programme (see Figure 1). This allows sharing of practice placement experiences and post-placement reflections as part of an integrated programme of learning.

Practice placements take place across Scotland. Students get a breadth of experience over the four placements. These may include but are not limited to NHS, Local Authority, voluntary sector, and private practice; inpatient, outpatient, community and virtual environments; with people with complex comorbidities, no diagnoses or difficulties associated with marginalised social status.

For Placement 4, students have the option of a 'Mobility Placement' and can arrange a placement outside Scotland. Please refer to the Mobility Placement Handbook for more information and the deadlines for applying.

## 2.1 Aims of practice education

By undertaking practice education (at SCQF Level 10) students are supported to:

- Transfer and apply Occupational Therapy principles, concepts, and skills essential for competent practice in a range of practice settings.
- Provide safe, effective, and comprehensive person-centred Occupational Therapy.
- Devise, plan and apply interventions and prevention strategies that facilitate service-user empowerment, promote occupations, and enhance health and well-being for individuals and society.



- Develop and take responsibility for decision-making and professional judgment, based on independent study, and transfer evaluative, reflective and problem-solving skills to the practice setting.
- Develop their professional identity as occupational therapists.

## 2.2 Ethics and professional conduct

As future Allied Health Professionals and Occupational Therapists, Occupational Therapy students must always adhere to the following codes of ethics and professional conduct. Students **must** become familiar with these. Hyperlinks provided here.

Royal College of Occupational Therapists (2021) Professional Standards occupational therapy practice, conduct & ethics

Health and Care Professions Council (2016) Guidance on conduct and ethics for students

## 2.3 Practice education hours

Students will accrue at least 1000 hours of practice education over the programme. These hours will include a range of practice activities whilst undertaking practice-based learning. Activities will differ depending upon the placement and will include direct work with people who use services, as well as broader project work, leadership, and development roles.

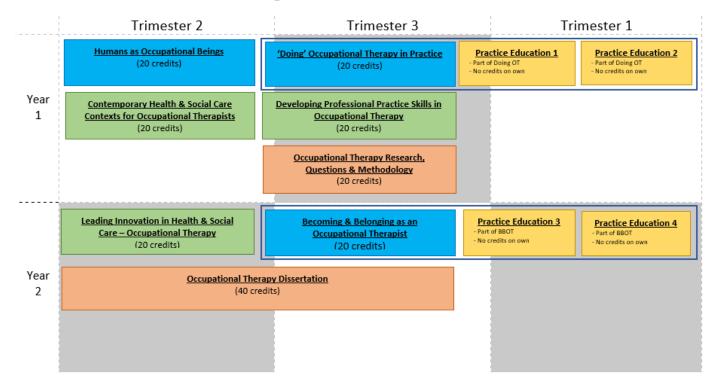
Students may accumulate additional practice hours in line with Royal College of Occupational Therapists standards as follows.

- a maximum of 40 hours of simulated practice-based learning.
- a maximum of 3.5 hours of self-directed study relevant to practice-based learning every week, or the equivalent pro-rata amount for non-full-time practice-based learning activities.
- hours recognised as prior learning that:
  - must not exceed the hours of practice- based learning scheduled for the first year of the receiving education provider's pre- registration programme.
  - must have been assessed.
  - o must have been successfully completed.



# MSc Occupational Therapy (Pre-Registration)

## **Programme Structure**



*Figure 1: Programme structure for MSc Occupational Therapy (Pre-Registration)* 



## 2.4 Practice education settings

The demographics of the Scottish population are changing and consequently, Health and Social Care services are evolving. Occupational therapists are increasingly working with service users who present with complex needs or co-morbidities in a range of settings, performing diverse roles within these settings, and working in new and innovative ways. Placement allocations reflect this, ensuring students access a breadth of experience. Placement experiences will include a range of the following settings:

- Public, independent, private and third sector settings
- Urban, rural, local, or international settings
- Non-frontline settings, for exposure to strategic and leadership roles and/or within research; departments or organisations
- Organisations for people who are under-employed, disempowered, dispossessed, or socially excluded.
- Organisations caring for people of different ages, from different socioeconomic and cultural contexts, with recently acquired and long-standing occupational needs and with different levels of physical and psychosocial functioning.
- Settings using individual, group, community, and population approaches.
- Settings where there are no occupational therapists currently employed.

## 2.5 Placement models

As described above there are a range of settings where students are placed. In these settings, there are different models of practice education. Various terminology is used to describe these models and we outline this below. However, for every placement, all students will have a named:

- Practice Education Supervisor who has day-to-day responsibility for their activities, health, and safety
- Practice Educator (or Practice Education Assessor) who facilitates profession specific learning and development and assesses achievement of the learning outcomes (this may be the same person as providing day-to-day supervision or another person)
- A University Lecturer who will provide mid-way contact.

The roles and responsibilities of the parties are outlined in section 4.

#### Blended or Remote placement experience

Partly or wholly working from home/not on site and using a range of technology to engage with placement learning and apply and demonstrate practice knowledge and skills. Reflects current and future innovations in practice and provides flexible response to Public Health or other restrictions.

## Peer Assisted Learning (PAL)

Where two or more students are placed together with the same practice educator/s. Students support one another's learning.



## Project placement

A project-based placement is where students work on a defined project in place of, or in partial place of, direct work with individual service users on a project with benefits to the service and service users.

#### Role emerging /diverse setting

A role emerging or diverse setting placement is where a student is placed in a setting where there has never been an occupational therapist before. Typically, these are supervised on a 'long-arm' basis.

#### Long-arm supervision

In some placements, there will be no occupational therapist on-site with the student. Day to day support is provided by a Practice Education Supervisor – usually a manager within the host organisation. Occupational Therapy Supervision and assessment will be provided by the Practice Educator, a qualified occupational therapist, based in another site or service; on occasion it may be an appropriate University Lecturer. This is called long-arm (or long-reach) supervision. It can be applied in any placement model.

# 3. Modules

Each placement is assessed at SCQF Level 10 and is part of an academic module with additional assessed component at SCQF Level 11. The practice placement assessed component is developed at Honours level rather than Master's Level to reflect the fact that students are able to apply graduate attributes from their prior education, but that they remain a novice in occupational therapy and therefore cannot be expected to *practice* at Masters Level. Practice education placement assessments are pass/fail and this component must be passed as part of the whole module.

Practice Education placements have a formative assessment (via a midway review and continual formative feedback in supervision) and a summative assessment (the final Assessment Report).

## 3.1 Learning outcomes

Each module containing a placement component has specific learning outcomes, including those tailored to individual practice education placements. These placement learning outcomes are designed to align with the standards set by the Health and Care Professions Council (HCPC) from their registrants at graduation. As students progress through placements, their learning outcomes evolve to reflect the development of their practice skills. To successfully pass each placement, students must achieve all the specified learning outcomes at the point of assessment.



#### Practice Placement 1 Learning Outcomes

- LO1 Demonstrate understanding of occupation and the occupational therapy process in relation to the service context.
- LO2 Identify relevant policies and maintain professional standards of behaviour, including awareness of your scope of practice, the need for continuing professional development and management of your own performance and the requirements of the Health Professions Council and Royal College of Occupational Therapists.
- LO3 Consider occupation and the implementation of as a medium for facilitating change and/or promoting quality of life with a range of people and groups, demonstrating awareness of the impact of socio-economic and cultural factors that influence peoples' occupational performance, choices, and roles.
- LO4 Exhibit clinical reasoning, locating evidence and interpretation of appropriate information related to the person, group, community, and the practice setting.
- LO5 Develop relevant practice skills, demonstrating understanding of occupation centred practice and discuss possibilities of activity analysis, grading and adapting environments, determining when an intervention should cease or be adapted.
- LO6 Develop written and verbal communication skills, professional interactions, and selfresponsibility within practice setting, understanding the importance of and obtaining informed consent and working within a safe, ethical, and rights-based approach.

#### Practice Placement 2 Learning Outcomes

- LO1 Demonstrate practice knowledge, applying occupation-centred principles within the occupational therapy process in a service or community context, working within an equal opportunity and ethical framework.
- LO2 Recognise and discuss service changes, developments, and policies that impact on practice contexts, recognising the scope of your own practice skills, when to seek advice and when to refer to others and the need for continued professional development.
- LO3 Identify factors impacting on occupational engagement, participation or performance and collaborate with the individual and carer/family where appropriate to prioritise occupational needs.
- LO4 Demonstrate a range of clinical reasoning strategies: reflecting on own performance, assessment protocols, the setting, interventions, or resources available and desired outcomes.
- LO5 Use and/or explain the use of occupations within a treatment process to facilitate change and/or quality of life with a range of individuals or groups, including options for adaptation, grading, education, and environmental factors.
- LO6 Demonstrate communication skills with individuals, groups, carers, and team members including formal/informal written and oral communication understanding the limits and



importance of confidentiality, information governance and safe and effective use of health and social care information.

#### Practice Placement 3 Learning Outcomes

- LO1 Demonstrate, apply, and articulate relevant knowledge, adapting and applying to the setting, using occupation-centred principles within the occupational therapy process, and within an equal opportunity and ethical framework.
- LO2 Identify, appraise, and discuss service changes, developments, and policies that impact on practice contexts, recognising the scope of own practice skills, when to seek advice and when to refer to others and demonstrate own continued professional development.
- LO3 Identify and analyse factors impacting on occupational engagement, participation or performance and collaborate with the individual and carer/family where appropriate to prioritise occupational needs and opportunities.
- LO4 Demonstrate, articulate, and apply a range of clinical reasoning strategies: reflecting on own performance, assessment protocols, the setting, interventions, or resources available and desired outcomes.
- LO5 Design, justify and explain the use of occupations within a treatment or intervention process to facilitate change and/or quality of life with a range of individuals or groups, including options for adaptation, grading, education, and consideration of environmental factors.
- LO6 Demonstrates proactive, professional, and appropriate communication skills with individuals, groups, carers, and team members including formal/informal written and oral communication, with a consistent understanding and evaluation of the limits and importance of confidentiality, information governance and safe and effective use of health and social care information.

#### Practice Placement 4 Learning Outcomes

- LO1 Appreciate the broader and global contexts of service provision and populations and the importance of these to occupational therapy practice within changing environments.
- LO2 Seek out evidence and apply new information, using own initiative and skills, to develop occupational therapy practice and/or occupational therapy role potential, while valuing the contributions of others.
- LO3 Demonstrate professional practice skills, interactions, and knowledge to work with people/populations who have complex needs, considering socio-economic and cultural factors to a level that reflects the core knowledge and practice skills of a new practitioner.
- LO4 Take personal responsibility and accountability for managing or leading on agreed cases or a relevant project, adhering to relevant policies/standards/guidelines, exercising a professional duty of care and understanding the principles of safeguarding and informed decision making contributing to safe and effective practice.



- LO5 Demonstrate and discuss relevant clinical reasoning processes and person-centred practice when delivering all aspects of the occupational therapy process to facilitate change.
- LO6 Demonstrate a range of professional communication skills. Evaluate your personal professional conduct and critically evaluate your responsibilities and performance in providing a safe, effective practice within a rights-based approach to practice. Identify your future learning needs based on the RCOT career development framework.

## 4. Assessments

Each practice education placement (PP1-PP4) has an assessment report tailored to the respective learning outcomes; each learning outcome has a set of criteria that illustrate how the learning outcome is met – **all criteria** must be successfully and consistently demonstrated to achieve the learning outcome. Students and practice educators should familiarise themselves with the assessment report appropriate for their placement (<u>downloadable here</u>).

Students are assessed on a pass/fail basis. **Students must pass each criteria within all learning outcomes to pass the overall placement.** Students will receive feedback on each of the assessment criteria about areas of strength and those for development.

The following is guidance for a Pass or Fail grade.

Student performance should be considered according to their level of experience.

Grade	Description
Pass	All criteria for each learning outcome have been met
Fail Unsatisfactory	One or more criteria have not been met. And/Or:
performance or non- attendance	<ul> <li>Demonstrates unprofessional behaviour and/or attitudes.</li> <li>Demonstrates unsafe practice.</li> <li>Demonstrates insufficient ability to communicate with and/or form/sustain professional relationships with others.</li> <li>Demonstrates insufficient ability to problem solve, analyse, or evaluate.</li> <li>Shows insufficient understanding of the application of theoretical principles and concepts to practice.</li> <li>Demonstrates insufficient self- management skills.</li> <li>More than six days of absence</li> </ul>

It is anticipated students will require appropriate GUIDANCE and SUPPORT to achieve a pass.



discontinued and considered void at the point where the minimum
attendance of 80% cannot be achieved. In this situation, students
would be required to repeat the module as a first attempt with the
minimum attendance being achieved.

## 4.1 Assessment Procedure for Practice Placements

- The Practice Educator/Practice Education Assessor is the assessor.
- Before the placement, read the Practice Education Handbook, module descriptor and assessment document.
- The assessed Learning Outcomes are predetermined, and all must be achieved to pass the placement.
- Whilst students are responsible for initiating arrangements for the midway and final assessments, the assessor will facilitate this process, where appropriate.
- Midway discussions should involve the University Lecturer. Contact details and mid-way meeting dates should be sent to the University Lecturer by the second week of placement. This meeting may be via TEAMs, phone or another format that is appropriate.
- The University Lecturer or Placement Lead should be contacted at the earliest opportunity in the event that the student or practice educator are experiencing difficulties.
- All relevant forms should be completed and given to the student at the end of the placement to be submitted to the university **no later than 14 days working** following the completion of the placement.

## 4.2 Assessment Responsibilities for Student

Students are responsible for the Assessment Report and initiating arrangements for midway and final assessments. This includes providing the Assessment Report to the Practice Educator and the safekeeping of all information relating to assessments whilst on placement; and returning all assessment records to the School of Health and Social Care, where they will be registered and held centrally as a record of practice performance and completed hours.

Assessment Reports must be submitted electronically to the Module submission point on Moodle, fully signed **no later than 14 days** following the last day of placement. The student is responsible for checking that all parts of the report have been completed correctly to include the signatures of the Practice Educator and student.

Should a completed Assessment Report be lost, then this will necessitate a repeat assessment unless the result has been recorded in the central register in the school. If, for any reason, assessment forms are sent to the school by post, then this must be by recorded delivery.

After careful reading of all the criteria itemised in the Learning Outcomes, any problems of interpretation must be discussed with the Practice Educator within the first two days of the placement. **If still unsure, please contact the University Lecturer.** 

The University Practice Education Lead may become involved when agreement cannot be reached between the student, Practice Educator and University Lecturer.



## 4.3 Midway review (Formative Assessment)

Students should organise an appropriate date and time for discussion between the Practice Educator, University Lecturer and themselves using the Mid-Placement Contact sheet. This will be during the placement, at a point where assessment of the Learning Outcomes is appropriate and where sufficient time remains to address any areas for development. Feedback will be provided and recorded on student performance related to each of the Learning Outcomes. 'Feed-forward' information will be given to guide students in what to do to successfully achieve the specified criteria.

During the meeting with the University Lecturer, both student and the Practice Educator will have an opportunity to speak individually with the University Lecturer in confidence as required. In the event that a practice educator is concerned about student performance and the possibility that the student is at risk of failing the placement, an action plan should be agreed at this meeting to include further contact to discuss progress.

## 4.4 Final (Summative) Assessment

The summative assessment involves the following stages:

- The Assessment Report will be completed by the Practice Educator on the last week of the placement and given to the student to complete their sections. If additional support during the final assessment is required, then either the student or Practice Educator can approach the University Lecturer. If a student raises concerns about the placement with the University Lecturer, the identified Course Advocate will be contacted. Please see the guidance at <u>National</u> <u>whistleblowing standards</u>
- 2. Students record their comments. The Practice Educator will not sign the Assessment Report until they have read student comments. These comments are an important part of the ongoing evaluation of practice placements.
- 3. Successful completion of the placement will be confirmed once the Assessment Report has been received by the Practice Education Lead by the stipulated date. Should the Assessment Report not be received by the stipulated date, this will result in a failure of the first attempt at the module with a date for resubmission of the paperwork then being stipulated by the Practice Education Lead.

## 4.5 Reassessment

Failure to achieve a satisfactory level of skill in any one of the assessed Learning Outcomes will result in the placement being deemed a fail. Following a failed placement, one resit opportunity will normally be considered and arranged. Decisions about placement resits will be at the discretion of the Exam Board. Hours accrued during a failed practice placement do not count towards the minimum requirement of 1000 hours (RCOT, 2019).



A placement resit will normally replace the next placement in the programme. The resit may take place in a different placement setting to the first attempt. The same Learning Outcomes must be completed as for the first attempt. Failure to pass the second attempt at placement will normally result in a student being withdrawn from the course.

Consideration of the issues concerning resit placements will involve the Programme Lead, Practice Education Lead, and the student. A plan for returning to a placement, including preparation and support, will be discussed with Practice Education Lead

# 5. Roles and responsibilities on placement

## 5.1 Practice Educator/Practice Education Assessor

In most cases the Practice Educator/Practice Education Assessor will be the same person as the Practice Education Supervisor (see below responsibilities). These responsibilities would be separated in long-arm supervision placements, where the Practice Educator is based elsewhere, and the Practice Education Supervisor has day to day responsibility for the student. The Practice Educator/Assessor is viewed as part of the programme education structure and as such may be included in information (within the remit of GDPR principles) relevant and pertinent to ensuring any reasonable adjustments and support strategies are in place for students.

## 5.1.1 Pre-placement

- Ensure Practice Education Training from a Higher Education Institution is up to date.
- Familiarise with existing and updated programme documentation.
- Share information about the setting and preparatory work. You might want to use our Placement Profile Document (Appendix 1).
- May liaise with student and University Lecturer regarding any additional support/reasonable adjustments identified.

## 5.1.2 During placement

- In partnership with the student, complete a learning contract to set aims and objectives and agree a monitoring process. Consideration should be given to the setting context, opportunities and student knowledge and competence (See Appendix 2).
- In partnership with the student and Practice Education Supervisor, facilitate learning by selecting appropriate activities via weekly meetings such as identifying appropriate service users, projects and activities that are safe and recorded appropriately.
- Provide students with up-to-date knowledge of practice.
- Complete weekly supervision for approximately one hour where the student can feedback on the weeks activities and Practice Educator can provide support in decision making for assessment, treatment, and evaluation, and communicating with colleagues.
- Monitor progress throughout the placement so that constructive input can be given for any areas for development with input from the Practice Education Supervisor. Feedback should be timely, honest, and constructive.



- Complete and document midway and final assessment with input from Practice Education Supervisor, University Lecturer, and service users (where appropriate) and provide to the student.
- Liaise with the University Lecturer where a student is identified as failing to achieve a satisfactory standard at the mid-way assessment.
- Countersign student documentation.
- Inform the University of any staff changes that may affect placement provision.
- Attend arranged Practice Educator Training, and where possible the Annual Practice Education Conference and Site Visits arranged by the University.

## 5.1.3 Post-placement

• Complete and submit post-placement evaluation.

## 5.2 Practice Education Supervisor

In most cases, Practice Education Supervisor and the Practice Educator/Practice Education Assessor are the same person. With the support of on-site colleagues, the Practice Education Supervisor will:

#### 5.2.1 Pre-placement

• Familiarise yourself with existing and updated programme documentation.

If a Practice Education Supervisor is unable to provide a placement which has been agreed with the School, they should make every effort to provide an alternative placement. NHS providers should follow the identified guidance: <u>Managing Student AHP Practice-based Learning Cancellations:</u> <u>Guidance</u>. If an alternative placement cannot be identified, responsibility for relocating a student will rest with the School.

## 5.2.2 During placement

- Provide a safe placement environment.
- Conduct an induction which addresses all areas of the Practice Placement Induction Checklist (see Appendix 2).
- Provide students with information on departmental policies and procedures, including Accident and Health and Safety policies.
- Inform the University within 24 hours of any injury/illness that a student suffers while on placement. A copy of the incident form should be sent to the Practice Education Lead within 24 hours, maintaining patient confidentiality.
- In partnership with the Practice Educator/Practice Education Assessor, provide work and support that enables students to develop appropriate skills, select service-users and engage in work-based activities suitable to their stage of education. These activities should reflect the typical range of tasks undertaken by Occupational Therapists within the placement setting and align with the student's level of experience. The university can assist if required.
- Ensure that any work, assessment of the service-user, and/or activity has been properly conducted and recorded.



- Provide support in developing decision making about treatment, assessment and evaluation, and communicating findings with colleagues.
- Ensure that students are treated in accordance with applicable legislation.
- Ensure that students are not placed under undue risk to their physical or psychological health during the pursuit of duties on placement.
- Ensure that all students' work is overseen by a suitably qualified professional.
- Inform the University of any staff changes that may affect placement provision.

If you are experiencing difficulties throughout the placement, the Practice Educator will contact the University Practice Education Lead at the earliest opportunity. Early recognition and awareness of this will enable appropriate support strategies to be implemented as soon as possible.

## 5.2.3 Post placement

• Complete and submit post-placement evaluation.

## 5.3 University Lecturer

A University Lecturer is responsible for supporting the placement and can be part of the assessment process. They are the first point of contact with any issues affecting the placement and will also provide midway contact to discuss a student's progress. The University Lecturer and Practice Education Assessor may be the same person.

## 5.3.1 Pre-placement

- In long-arm supervision placements, liaise with the Practice Education Supervisor and Practice Education Assessor to set out a plan and clear responsibilities for the placement.
- Liaise with student and Practice Educator regarding any reasonable adjustments or additional support strategies identified.

## 5.3.2 During placement

- Support Practice Education Supervisor and Practice Education Assessor to work collaboratively in all aspects of practice education as required, including determining a suitable workload and completing the Assessment Forms.
- Respond to any concerns raised and communicate the outcome of these clearly.
- Ensure practice educators and students are aware of health and safety at work responsibilities and local Health and Safety policies and procedures.
- Monitor the health and safety environment, procedures, practices, and their implementation and raise issues if required. Any incident involving student Health and Safety on placement will be further investigated by the University Lecturer following the School of Health and Social Care procedure.
- Monitor the Practice Placement Induction Checklist, completed within two weeks of placement (See Appendix 3).
- Encourage open discussion between students and the Practice Educator at the midway and final assessments.



- Support and encourage students to apply knowledge, skills and evidence in practice and think critically. This includes prompting about alternative models, assessments, intervention and evaluation, decision making and professional judgement.
- Support students to develop knowledge of continual professional development including developing continual professional development portfolio.
- Support students to develop awareness of the need for self-directed study to increase knowledge base. Provide feedback on progress as required.
- Ensure students understand the importance of demonstrating appropriate professional attitudes.
- Ensure students are maintaining their health and wellbeing whilst on placement.

## 5.4 Student

## 5.4.1 Pre-placement

- Complete the 'Preparation for Professional Practice Passport' and certify this.
- Familiarise yourself with this handbook.
- Read the University Student Health and Safety Responsibilities on Placement (Appendix 4).

When allocations are made by the Practice Education Lead, the student will be provided with the contact details of a representative of the practice setting. Students must send an introductory email, or letter, if necessary, to the Practice Educator in a timely fashion, before the start of the placement. This letter/e-mail should include a copy of the Learner Pre-Placement form which refers to their experience to date, and personal goals for the placement.

It is the student's responsibility to prepare adequately for each placement. This may include reading suggested by the practice representative, their own review of the evidence or a site visit, among other preparatory activity.

All students must attend an Occupational Health appointment before, and during the programme if referred. Students must have their Hepatitis B vaccination **prior** to going on placement, this can be arranged via Occupational Health. Students must be able to show evidence of their immunisation record.

Should students identify as having a disability or additional learning needs, they are encouraged to discuss this with their Practice Educator or include this in the introductory email/letter. Students can meet with the Practice Education Lead or their Personal Development Tutor in advance of placement to discuss disclosing and identify potential reasonable adjustments and support.

## 5.4.2 Professionalism

## **Code of Ethics and Professional Conduct**



While undertaking practice education, students **must always comply** with the relevant codes and standards. Please review the following guidance:

- For guidance on health for practice in Occupational Therapy, please consult the HCPC documents: '<u>Health</u>, <u>disability</u> and <u>becoming</u> a health and <u>care</u> professional' and the '<u>Guidance</u> <u>on health and character'</u>.
- Programme specific regulations on Fitness to Practice.
- <u>The Royal College of Occupational Therapists (2021) Professional Standards for occupational</u> <u>therapy practice, conduct & ethics.</u>
- <u>The Health and Care Professions Council Standards Guidance on conduct and ethics for</u> <u>students</u>

#### **Responsibilities and Expectations**

- Students are accountable for the care of designated service users, ensuring they seek help and advice whenever necessary. They must always act with accountability for professional practice and its outcomes.
- Students are expected to respect the rights, dignity, and individual sensibilities of every service user. All service-user activities should be conducted with respect for their dignity, rights, and beliefs and in a non-judgmental manner.
- Students must maintain a professional boundary between professional and personal affairs. Accepting gifts from service users is strictly forbidden unless approved by the Practice Educator.
- Students will always conduct themselves appropriately in the practice setting. Respect, courtesy, and professional behaviour should be shown to patients, service users, relatives, carers and practice and academic colleagues at all times.

#### Confidentiality

Students have a professional and ethical responsibility to maintain absolute confidentiality and security regarding any information pertaining to service-users and staff. When on placement in NHS facilities, students must be familiar with the NHS Code of Practice on Protecting Patient Confidentiality. In other practice settings, students must become familiar with their policies on maintaining confidentiality for their service users and what is required.

#### Communication

- Students shall communicate and co-operate with professional staff and carers in the interests, and with the consent of, service users.
- It is **vital** that students provide feedback to service users, other health professionals, practice supervisors and academic staff. This should be communicated appropriately with courtesy and respect.
- Students must be punctual for any appointments related to the placement. If likely to be unavoidably detained for any reason, students must make every effort to inform all individuals concerned. This is both professional and polite.
- Students must be aware of the importance of accurate record keeping.



- Students must always adhere to manual handling regulations. If in doubt, students must seek help/advice from practice colleagues **before** working with service-users who might need physical support (see Student's Health & Safety Responsibilities).
- If a student suffers an injury or is unwell during the placement, they must report this immediately to their Practice Educator. If required to leave your placement, students should also inform the Practice Education Lead.
- Students are strongly advised to discuss placement learning needs in relation to any disability with the Practice Education Lead at least one month before commencing their first placement.

#### **Absence from Placement**

Any absence from placement must be reported daily to the Practice Educator **and** the University. Students are not expected to take annual leave during placement, except for recognised Bank Holidays.

If a student is unwell during placement, they must complete the Self-Certification Form (Appendix 6) upon returning and submit a copy to their Practice Educator, as well as to the University via the Practice Education Lead at <u>a.gray2@napier.ac.uk</u> and the School Administrator, Martin Young (<u>m.young2@napier.ac.uk</u>). If additional support or consideration is needed, this may be shared with relevant staff, such as the student's Personal Development Tutor, as appropriate.

#### 5.2.3 Consent

Students must ensure that they have the consent of a service user to work with them, where the service user has capacity to give this, and that this is documented and reviewed appropriately. Where a service user has been determined not to have capacity to consent, students must operate within legal parameters, seeking guidance from their practice educator as to the application of the law in their setting.

## 5.2.4 Health and safety responsibilities

Students must become familiar and comply with local health and safety regulations and procedures for each placement.

- It is expected that high standards of personal hygiene are maintained, and hands are washed at appropriate intervals.
- Risk assessment and good practice for Moving and Handling procedures should be employed.
- Students should be alert to "flash situations" which could lead to conflict, and/or verbal abuse from service-users or carers and respond appropriately. In such situations personal safety is paramount.
- Ensure that any incident relating to health and safety is properly documented and reported to practice and university staff. Any incident will be further investigated by the Practice Education Lead following the School of Health and Social Care procedure.
- Inform relevant university and practice staff of any existing or changes in circumstances which might affect fitness or ability to commence or continue a placement. Students must stay away



from the placement when unfit through illness. This responsibility is to themselves, practice colleagues and service users.

• Observe overriding ethical and legal duties to protect the health and safety of service users.

If a student believes **that they may have been exposed to infection with a blood borne virus** (BBV: Hepatitis B, Hepatitis C, HIV) in any circumstances, they must seek medical advice and, if appropriate, antibody testing prior to going on placement. Failure to do so may breach duty of care to patients/service users. Students must cease certain care activities until they have accessed medical and occupational health advice about modifying or restricting working practices if they believe they may have a BBV. Students should discuss any concerns in confidence with a member of staff of the relevant Occupational Health service. If a student believes they have been exposed to a BBV in placement, they should immediately seek medical and occupational health advice with the guidance of practice colleagues. Be familiar with the full guidance from Public Health Scotland (2023) 'Integrated guidance on health clearance for healthcare workers and the management of healthcare workers infected with bloodborne viruses (Hepatitis B, Hepatitis C and HIV)'.

Students must let their Practice Education Lead know if they have had any exposure to medical issues of concern prior to or during placement.

#### 5.2.5 Dress Code

Students must comply with the dress code as required by placement setting including uniform, footwear, jewellery/watches, hair, make up, tattoos, and personal protective equipment PPE. Your identity badge should always be kept in an appropriate place on your person, visible to others.

Unless otherwise advised, you should wear the uniform issued by the University. Uniform should be clean, pressed, and tidy. A clean uniform should be worn for each shift and be changed into on-site. You should not travel/commute/walk wearing your uniform. You must wash your hands before donning your uniform.

When a uniform is physically soiled it must be changed, even if this means acquiring spare clothing/theatre green in the practice setting.

Uniforms should be washed without other items of clothing at 60-65<sup>c</sup> in a domestic washing machine. Uniforms should be air dried and **not** tumble dried. When dry, uniforms should be ironed with a hot iron. Uniforms should then be stored, folded and flat, in a fresh, unused plastic bag and sealed.

Footwear should be appropriate to the practice environment.

Jewellery should be kept to a minimum. Single small ear studs, smooth wedding rings are generally acceptable. Jewellery, which has a rough surface or hangs, could cause damage to others, or hold infection and must not be worn. Watches should be removed when working with service-users.

Long hair should be tied up.

Students should seek the advice of their Practice Educator regarding exposed tattoos and the most appropriate manner of concealment if required.



Appropriate Personal Protective Equipment (PPE) should be worn during direct patient contact and when dealing with all body fluids. You should follow the guidance of the practice setting. Aprons and gloves should be discarded after any procedure for washing or disposal. Any disposable PPE must be changed between patients.

The University insists that you comply with these recommendations. It is your protection against infection and the protection of service-users when they may be at their most vulnerable.

## 5.2.6 Identifying your learning needs and goals

Familiarise yourself with existing and updated programme documentation.

You are responsible for self-directed learning, including revision, before and during the placement, to ensure that you have the required knowledge to undertake your duties. You are expected to have completed any pre-reading suggested by your Practice Educator(s) prior to placement commencing.

Learning Outcomes for each placement are clearly documented in this Handbook. You will identify individual objectives to enable you to achieve these with your Practice Educator and should make clear any support or adjustment that would assist you. These are documented in the learning contract (see <u>Appendix 2</u>).

You must send an introductory letter/e-mail to the Practice Educator before commencement of the placement explaining your experience, goals and what you may need to work on as well as any adjustments you may need.

A key professional skill is recognising personal performance, strengths, and limitations. You are expected to monitor and report your perceived performance levels as a continuing process, but particularly at the midway and final assessment.

Practice Educators and the University are there to support you. Please let your Practice Educator know in advance of arriving for your practice-based learning if there are any adjustments required in terms of your health or learning requirements to help you participate to your full potential.

If you are experiencing difficulties throughout the placement, the Practice Educator will contact the University Practice Education Lead at the earliest opportunity. Early recognition and awareness of this will enable appropriate support strategies to be implemented as soon as possible.

## 5.2.7 Protection of Vulnerable Groups

You must undertake a Protection of Vulnerable Groups (PVG) check through Disclosure Scotland on entry to the course. Until the result has been received by the University, you will not be eligible to begin your placement.

The School of Health and Social Care Fitness for Practise Committee have the final say regarding the appropriateness of allowing students whose checks are not entirely clear to attend placements. Placement providers may refuse to offer a placement to students who have not provided an appropriate disclosure check.



It is your responsibility to inform your Programme Lead of any changes to your criminal record profile or any contact with a police department that may arise during your enrolment on the programme, and to ensure your PVG remains current and valid.

### 5.2.8 Mandatory training

You must complete and pass all mandatory training that make up your Edinburgh Napier Preparation for Professional Practice Passport.

#### 5.2.9 Accommodation

It is your responsibility to organise appropriate accommodation that will allow you to meet the required placement hours of work for the entire placement period. The placement provider may be able to provide information on local accommodation in areas that are unsuitable for commuting from Edinburgh.

Any behaviour (e.g., failure to pay accommodation bills, damage to accommodation) which may put the availability of a future student placement accommodation at risk will be reported to the Programme Lead for action.

## 5.2.10 Placement allocation

You will be given the opportunity to inform the Practice Education Lead of parts of the country outside of Edinburgh where you may be able to arrange accommodation. This information must be passed on to the Practice Education Lead by February of each year as the placement lists for the academic year are compiled from March/April. Selected placement areas cannot be guaranteed as many factors are taken into consideration when placement lists are being compiled.

Barring exceptional mitigating circumstances, you are expected to attend the placements allocated by the Practice Education Lead. Failure to do so will result in the placement being deemed a fail. Examples of exceptional mitigating circumstances would include carer responsibilities, illness, with an accompanying medical certificate.

Circumstances do not normally allow for swapping of placements between students once placement lists have been compiled. This will only be permitted under exceptional circumstances.



# 6. Communication – including online

## 6.1 Communication between the practice site and university

Name	Position	Contact details
Ashleigh Gray	Practice Education Lead	A.Gray2@napier.ac.uk
Dr Juman Simaan	Programme Lead, MSc Occupational Therapy	j.simaan@napier.ac.uk

Information regarding Edinburgh Napier University staff can be found in the '*My Programme*' Student Handbook and Edinburgh Napier University web pages.

The same communication mechanisms exist between students and the University during practice placements. When communicating in any form please observe the <u>University values</u> and note the <u>Information Security Policy</u>.

## 6.2 Email

Students are allocated a university email address, which is the only official account for communicating with the Programme Team, School Support Team, and the University's support services. This email is linked to Moodle, Edinburgh Napier University's online learning environment, ensuring that students receive any notifications from Moodle directly. Regularly checking this email is essential for staying connected to the University.

As a member of a professional body, professional behaviour and conduct also relate to communication. Please see the <u>HCPC Guidance on conduct and ethics for students</u> and Edinburgh Napier University guidance on <u>Netiquette.</u>

To ensure compliance with data protection legislation, the University e-mail address is the only account the University will use to communicate with students. Students must check this e-mail address regularly to ensure you get relevant information from the University.



## Students must check their Edinburgh Napier e-mail account regularly.

## 6.3 Moodle

Support for Moodle is available from the IT Support Desk for any login issues, from the school office for incorrect modules, and from your module leader for access to materials and activities. The Programme Moodle page can be found <u>here</u>.

Information regarding placement will be found on the relevant Moodle pages.



Students must check the programme Moodle pages regularly.



## 6.4 Social Media

MSc Occupational Therapy may make use of social media such as Facebook and X to create additional online spaces for communication with the Programme Team, fellow students, and associates outside of the University. The University recognises the potential benefits of social media and encourages responsible and acceptable use so that students can enjoy the benefits of online networks, whilst maintaining the high standards of conduct expected by the University, the Royal College of Occupational Therapists and the Health and Care Professions Council.

Guidance of how to be 'webwise' can be found in the Data Protection section on myNapier. You should also refer to the <u>HCPC guidance on social media use</u>



Students must maintain a professional online identity when using social media.

## 6.5 Communicating last minute changes to activities

Last minute changes whilst you are on the programme will be communicated through the module leaders or from our administrator by email or telephone. Important information will be communicated through the module Moodle site 'announcements' and 'calendar dates'. The Moodle site should be viewed at least 3 times a week.

## 7. Quality assurance

## 7.1 Quality Standards for Practice Learning

Quality practice-based learning opportunities, within a positive learning environment, support the development of healthcare professionals to deliver safe and effective person-centred care. The Quality Standards for Practice Learning (QSPL) 2020 have been created so that learners and those individuals and organisations who support them understand their responsibilities and expectations in relation to practice-based learning. The standards apply to any structured practice-based learning that is accessed by nurses, midwives and allied health professions and supported through an educational programme.

The QSPL replace the previous Quality Standards for Practice Placements (QSPP), support existing professional regulatory standards, and are fully endorsed by the Scottish Government Health Directorate and NHS Education for Scotland. The Nursing and Midwifery Council (NMC) and the Health and Care Professions Council (HCPC) acknowledge the contribution that these standards make to enhance the learning environment.

Applying the QSPL has several benefits:

- Supporting placement providers to monitor and improve the quality of practice placements in the workplace.
- Providing consistent understanding and expectations across professions, education providers and learners to support and promote a quality learning environment.



- Encouraging closer partnership working between placement providers and education providers to ensure sharing of practice within and across professions.
- Enabling placement providers to recognise the importance of providing a quality learning environment for all placement learning experiences.

For full details on the QSPL <u>click here</u>.

## 7.2 Audit

The QSPL and audit tool are split into five distinct sections to demonstrate that supporting learning is the responsibility of everyone, including learners. At Edinburgh Napier University, we use this tool to support an ongoing cycle of continuous improvement and to meet professional bodies' requirements (HCPC) as it informs our bi-annual audit of each practice placement. AHPs continue to use the previous QSPP standards (QSPP) for Sections 1 and 2 until a new digital audit tool is developed and will use the newer QSPL standards for Sections 3, 4 and 5 from January 2024.

For more information regarding the QSPL Audit Tool, <u>click here</u>. For the School of Health and Social Care Procedure for Practice Learning Environment Audit Profile see Appendix 5.

## 7.3 Student evaluations

Students are asked to evaluate their placement. Information will be shared by the Practice Education Lead at the end of each placement.

## 7.4 Practice educator evaluations

Practice educators will be asked to evaluate their placement. Information will be shared by the Practice Education Lead at the end of each placement.

# 8. Concerns and complaints

## 8.1 Student wellbeing

MSc students are often balancing multiple commitments and placement can be a stressful time. We encourage all students to attend to their occupational balance, taking care to get enough rest, eat well and engage in occupations meaningful to them around placement. We also encourage students to communicate with others if they feel their wellbeing is being affected whilst on placement.

It can be difficult to raise this between Practice Educator and student, and not all students will feel comfortable or want to do this. If a student has a concern about their wellbeing whilst on placement,



whether related to placement or not, there is a comprehensive range of support at Edinburgh Napier University.

Students can access advice, counselling, and wellbeing services via their myNapier dashboard. These services are available at any time including whilst on placement.

Students can contact the Student Experience Team within the School of Health and Social Care. They are experienced in supporting health and social care students on placement. They use a bespoke and person-centred approach to support with wellbeing and any other concerns, either directly or by signposting to further support.

Every student has a Personal Development Tutor who will get to know them over the course of their studies and is fully accessible during placement. This person will usually undertake the midway contact visit.

Students and practice educators can contact the Practice Education Lead, Ashleigh Gray throughout for advice, support, and guidance about any wellbeing concerns (<u>A.Gray2@napier.ac.uk</u>).

## 8.2 Complaints

Any complaints relating to placement will be addressed using Edinburgh Napier University's Complaints Procedure. The University is committed to attempting to resolve any matters of complaint via a fair, efficient, and transparent process. The University will seek to resolve a complaint as quickly as is possible whilst ensuring that any issues are investigated thoroughly before providing the final response/offer of resolution.

For full information on how to make a complaint please click here.

## 8.3 Whistleblowing

Whistleblowing is "making a disclosure in the public interest". It means that you have a reasonable and honest suspicion there is wrongdoing which affects others in your workplace (e.g., poor care, fraud, safety rules or guidelines have been broken, risk or malpractice). Generally, when someone "blows the whistle" they are raising a concern about a danger or illegality that affects others (e.g., service users, members of the public or their employer). The person blowing the whistle is usually not directly, personally affected by the danger or illegality. Consequently, the whistle-blower rarely has a personal interest in the outcome of the investigation with their concern.

#### The whistle-blower is raising the concern so that others can address it.

Please see the HCPC Whistleblowing policy by clicking on the following link: <u>HCPC – Whistleblowing</u> (<u>HCPC, 2019</u>)



Whistleblowing is different from a complaint, where the individual is seeking redress for themselves (e.g., grievance or bullying and harassment) and has a vested interest in the outcome. The individual is directly involved in the process and in presenting the evidence to support the concern. In this situation the whistleblowing guidance would not be the most appropriate route for dealing with such a concern.

If you are making a complaint regarding personal ill treatment, you should follow the University complaints procedure. It may be difficult to make the distinction between a complaint and whistleblowing and advice should be sought from your university (e.g. Personal Tutor or Programme Leader).

The University operates an open, 'no blame' culture in which students and staff can safely raise concerns about malpractice, risks or issues which may cause harm to service users and carers. In the pursuit of service excellence and patient care, Edinburgh Napier University encourages all staff to seek continuous improvement in the way in which they carry out their day-to-day responsibilities.

You have a responsibility to prioritise the safeguarding and wellbeing of patients and service users, and to take action when necessary to protect them if you believe they may be at risk (HCPC, 2024). Regardless of the context of care delivery, it is essential that you are aware of the mechanisms for reporting concerns, ensuring that you always practice within the Standards of Conduct, Performance and Ethics (HCPC, 2024).

You may worry that raising a concern is disloyal to those with whom you work; however, the health, wellbeing, and safety of members of the public and those in your care must remain your primary concern. Raising a concern in a timely manner can prevent harm or injury and prevent more serious or significant events arising.

Please read the guidance at <u>National whistleblowing standards</u>. Your Course Advocate is Professor Elizabeth A McKay.



# Appendix 1 - Placement Profile Document

Welcome to [Insert Name of the Practice Learning Environment]

Please find below some information which we hope will make your experience in this placement both informative and enjoyable.

PRACTICE PLACEMENT AREA
LEARNING OPPORTUNITIES
SUGGESTED READING/ PREPARATION PRIOR TO PLACEMENT
LOCATION OF PLACEMENT
USEFUL CONTACTS
WORK PATTERN
ABSENCE REPORTING



# Appendix 2 – Example learning contracts

Learning contracts can be written in many ways. What is most important is that student and practice educator are clear about 1) what they will be doing and 2) that doing this will lead to the achievement of the placement learning outcomes. It can be helpful to include what evidence will be provided to demonstrate learning, and to agree how feedback will be communicated.

#### Learning Agreement

Learning Needs and Opportunities Identified:

Engage in timetable as identified re: co-facilitation of group and 1:1 sessions – see timetable.

	Monday	Tuesday	Wednesday	Thursday	Friday
	08.30 - 16.30	08.30 - 16.30	08.30 - 16.30	08.30 - 16.30	08.30 -
					16.30
Morning			8.30 - 10.30	9.15 –	
			Tean	Redwood	10.00 -
			Meeting	Handover	11.00
					SV with Isla
		11.00 - 12.30		11.00 - 12.00	
		Cedar Lunch		Art Group	
		Group	11.30 - 13.00	with Isla and	11.30 -
			Redwood	Mel	13.00
			Lunch Group		Lunch Group
Afternoon		14.00 Cycling			Half Day
	14.30 CTM	Group with			
	with Jenny	Fiona			
			15.30 - 16.30		
			Student		
			Tutorials		

Engaged in induction expectations re placement.

Review manuals re standardised assessments i.e., VQ, MOHOST, ACIS

Attend handover and CTM and review TRAK notes.

Review activity analysis paperwork and identify activity. Complete paperwork and review.



#### Learning agreement

- 1. Carry out background/ongoing reading on HIV, homelessness, addiction and ARBD.
- 2. Continue to develop skills in carrying out initial interviews and initial assessments.
- 3. Continue to develop skills in using initial assessments to screen patients for appropriate assessments.
- 4. Continue to develop skills in carrying out assessments e.g. cognitive, kitchen and housing assessments.
- 5. Carry out group and 1:1 OT interventions with service users, develop clinical reasoning skills, evaluation, prioritise and manage interventions.
- 6. Continue to develop skills in treatment planning, carrying out risk assessments, grading, adapting, and planning interventions and adopt a person-centered approach.
- 7. Continue to develop written and verbal communication skills to write notes and continue to develop skills in communicating with the MDT team about patients.
- 8. Partake in identified training/development e.g. HIV training, learn from experienced members of staff, and visit third sector partnerships such as Cyrenians and primary care organisation the Access practice.



# Appendix 3 – Induction checklist

Student Name:	
Placement Provider:	

The following must be completed on the first day of the Practice Placement and each area covered should be marked with a tick or N/A where not applicable.

1. Induction to Practice Placement Setting	3. General Health and Safety Induction	
Introduction to Practice Educator	Fire alarm procedures explained	
Relationship between departments	Nearest means of escape identified	
Timekeeping	Location and safe use of fire-safety equipment	
Meal times, breaks and facilities	Moving and handling policy and procedures explained	
Location of toilets & handwash facilities		
Introduction to colleagues	Infection control policy and procedures explained	
Accompanied tour of the workplace	Violence and aggression policy and procedures explained	
	Smoking policy explained	
2. Role Introduction	Housekeeping rules explained	
Identification of the role of the student within the organisation Role-specific risk assessments explained, and location of documentation identified Other relevant health and safety protocols explained, and location of documentation identified Procedure for reporting faults explained	<ul> <li>Personal Protective Equipment (PPE):</li> <li>Clothing</li> <li>Eye protection</li> <li>Hearing protection</li> <li>Foot protection</li> <li>Head protection</li> <li>Hand protection</li> <li>Hand protection</li> <li>Use of site-specific equipment explained, and training procedures identified where required</li> <li>First Aider and First Aid facilities identified</li> </ul>	
	Reporting procedures for accidents and other safety issues explained	



4. Additional Information (add further page if required)			
I (student) confirm that I ha	ave received the information, instruction, and training above.		
Student	Date:		
Signature:			
· · ·			
Signature of person			
leading induction:	Date:		



# Appendix 4 - Edinburgh Napier University student health and safety responsibilities on placement

Each School, depending on the type of placement, will give suitable and sufficient Health and Safety information, training, and supervision to cover the Health and Safety risks pertinent to that placement. Please make yourself aware of these local School/Service guidelines.

It is important that all placement students make every effort to avoid risks to themselves and to others by acting in a safe and responsible manner.

## 1. Introduction

This Guidance provides you with an awareness of the health and safety aspects of placements. Placements provide an opportunity for you to apply skills acquired whilst at your institution to "real life" situations. There are health and safety aspects to every placement, namely:

- Being under the supervision of a third party.
- Being involved with, or undertaking, activities where you have little or no experience.
- Working in and visiting environments and locations that you are unfamiliar with.

#### **1.1.** Health and Safety responsibilities:

*Placement providers – organisations providing placements:* 

- Have a general duty to ensure your health and safety whilst on placement.
- Take account of your potential inexperience for activities you will be expected to undertake and put into place appropriate controls.
- Provide you with information, instruction, training, and supervision.

## **1.2.** Placement preparation

It is important that you:

- Attend briefings prior to placements commencing as health and safety will be covered.
- Familiarise yourself with the health and safety aspects of placements, particularly you and your placement provider's responsibilities, and what you should receive, particularly in the initial period.

#### **1.3.** Information, instruction, training, and supervision

These form the "backbone" of ensuring your health and safety whilst on placement and can include classroom-type situations; health and safety notices and signs; safe working procedures.

As soon as possible after commencing a placement, you must receive a health and safety induction. If you do not receive an induction, then raise this with your placement provider.



As your placement progresses so will the information, instruction and training you receive. Never undertake an activity or go into an area unless you have received appropriate information, instruction, and training to feel competent and confident.

Levels of supervision will vary from placement to placement and at points within a particular placement. Don't be afraid to ask questions of your supervisor and if you feel there is a lack of supervision, then raise this concern.

## **1.4.** Your Responsibilities

You must:

- Ensure you are aware of the emergency procedures.
- Pay attention to instructions from staff with regard to safety.
- Work safely, for your own sake and others.
- Take care as you go about the premises.
- Report any accident and get first aid treatment at once.
- Report any hazard you spot to a member of staff.
- Wear any personal protective equipment you are issued.
- Think before you act carelessness causes many accidents.
- Take care and ask staff for advice with lifting heavy objects.
- On no account should food be eaten in a laboratory environment.

## 1.5. What to do in the event of a fire or emergency

Due to the wide variety of work which is carried out and the possible complex layout of the various buildings, it is not possible to produce a set of valid and detailed emergency instructions to cover every situation which may arise. For this reason, each employer has its own emergency instructions relating to particular buildings. There should be in every building a notice setting out the procedure to be adopted in case of fire.

You must familiarise yourself with the workplace fire procedures. In particular, check the green and white directional arrows to the fire exits from your workplace. If you have any doubts, please ask your supervisor.

## 1.6. Fire extinguishers

Do not attempt to use an extinguisher unless you have received appropriate instruction and training, and it is safe to do so.

## 2. General Safety

## 2.1. Introduction

The prevention of accidents in laboratories, stores, workshops, and all other places of work is a duty of every individual using or entering them. Ensuring the safety of others is as important as the avoidance of personal injury.



Everyone should make it their first task to become familiar with any special instructions issued for dealing with emergencies specific to the place in which he or she is working.

## 2.2. General safety rules

Eating, drinking, smoking, and the application of make-up in laboratories or when handling or working with chemicals is prohibited. Smoking may also be prohibited in many other areas as well.

You should familiarise yourself with

- the layout of the building.
- the location of fire-fighting appliances and how they work.
- ways of getting out of the building in an emergency which may be different to the way you came in.
- the location of telephones.
- first aid arrangements.

Remember, it may be too late to find out very much when an emergency actually happens. If you have any queries on safety matters consult your supervisor or safety representative.

## 2.3. Lone working

Many companies have rules about working outside normal hours, e.g., 0800 to 1800 hrs, Mondays to Fridays. Saturdays, Sundays, Bank Holidays, and other official holidays are also usually regarded as outside normal hours.

Extreme care should be exercised when working outside these times and then only with the explicit authority of the management of that organisation. It should be forbidden to perform operations deemed hazardous by the employer, or his/her nominee, unless a full risk assessment has been carried out and authority has been given.

## 2.4. Electrical hazards

A main potential sources of accidents, indeed fatal accidents, in the workplace is the use of electricity. You should take great care and never interfere with any electrical apparatus or equipment.

Two of the worst electrical hazards are careless or unskilled workmanship and faulty or worn-out equipment. Neither of these hazards need arise. Electric and electronic supplies and equipment, including batteries and electrolytic capacitors, can be responsible for personal injury and even death. They can also cause fires and explosions. Remember, some foreign colour coding of electrical leads differs from British practice.

#### IF IN DOUBT ASK.



## Electricity and Fire

All portable electrical appliances should have a current PAT Certificate. This involves a mechanical and visual check that all socket outlets, switches, flexible leads, and electrical appliances are in good condition. In case of fire involving electrical equipment, the first action to take must be to switch off the power supply to that equipment.

## DO NOT use any damaged equipment. Report it to your supervisor.

## 2.5. Personal Protective Equipment

## **Protective Clothing and Equipment**

At the placement you may come into contact with some form of materials – liquid, solid or gas – which can cause injury if protective clothing or equipment is not worn.

If so, always use the protective clothing and equipment that is supplied for performing your work and make sure that it is the correct type of protection for the job. If in doubt, get advice from your supervisor.

You should at all times take good care of clothing and equipment provided for your safety, otherwise it may become a danger to yourself or others. If you find that clothing or equipment is contaminated after use, make sure that it is cleaned at once. Any defects should be reported to your supervisor immediately.

Personal Protective Equipment should only be worn in the work area which requires it. You may require extra personal protective equipment if you have a skin complaint which could be irritated by chemicals/substances. Please indicate any problems to your supervisor.

#### DRESS FOR THE PART

## Eye Protection

Your eyes are the most vulnerable part of your body and the simplest of injuries to them can have drastic consequences.

You must always wear goggles or eye shields when provided to protect your eyes from dusts, flying particles, molten materials, liquids, fumes or harmful light and heat. Make sure you have the correct protection for the work you are doing and wear it properly.

## YOU CAN LOSE YOUR SIGHT ONLY ONCE - SO PROTECT YOUR EYES

## 2.5.3 Noise

Excessive noise in the workplace can have a serious effect on your hearing. It creates stress which can affect your physical and mental well-being. Accidents can result from where you cannot hear instruction or warnings.



The University will make all efforts to reduce noise levels to comply with statutory regulations and codes of practice. Where noise levels are at or above those outlined in such statutory regulations or codes or practice, the areas will be clearly marked, and you must use the hearing protection supplied.

### LIKE EYESIGHT YOUR HEARING IS PRICELESS – WEAR THE PROTECTION PROVIDED

To ensure your own safety, as far as reasonably practicable, you should employ the age old maxim "If in doubt, ask".

#### 2.6 Control of Substances Hazardous to Health (COSHH)

The COSHH Regulations require the University to identify substances used or generated in the premises which are hazardous to health. These substances may be in the form of dusts, mists, gases, vapours, solids or liquids. An assessment of health risks created by work involving these substances is then made and measures instituted to control the risk involved.

Students are instructed to:

- Take part in company safety training programmes.
- Read container labels (telling you about health risks and precautions to take).
- Always use personal protective equipment properly and when required.
- Follow laid down safe systems of work, codes of practice and experimental procedures.
- Report any hazard or defect to your supervisor.
- Use COSHH control measures.
- Co-operate with monitoring and health surveillance.
- Label and dispose of waste chemical material according to departmental rules.

Remember, container labels provide important information including the identity of the substance, possible hazards, safety precautions, emergency action in case of spills, fire, or ingestion.

Further information:

- COSHH assessment record and material.
- Hazard data sheet should be available.

#### 2.7 Housekeeping

#### HOUSEKEEPING IS EVERYONE'S RESPONSIBILITY – THAT INCLUDES YOU!

Advantages of good housekeeping:

- Clutter and rubbish are the most common causes of fire and accidental injury).
- You can find what you are looking for quicker (improved efficiency and production and less frustration).
- Neat work area (more enjoyable and comfortable to work in).

#### Key steps to good housekeeping



- Machines keep clean and follow maintenance routines, check machine guards, power cables and switches report any defects immediately.
- Tools clean off dirt and oil, store in appropriate area, repair, or report defects.
- Storage materials, substances must be clearly labelled, store in designated areas, keep containers secure.
- Floors/aisles/access areas should be kept clear of debris and rubbish, do not store materials etc. where they could create a hazard.
- Personal Protective Equipment keep clean and store correctly.

## 2.8 Pregnancy, new mothers, and nursing mothers

Pregnant women, new mothers and nursing mothers are particularly sensitive risk groups and need to be protected against hazards. It is essential that if you fall into these risk groups that you inform your supervisor as soon as possible, so that any necessary precautions can be taken.

#### Health and Safety computer packages are available on Edinburgh Napier University computers.

To access these packages, go to:

- Start menu
- All Programs
- > Applications
- Health & Safety
- Cardinus Online Safety Training
- Health and Safety Essentials
- Workstation Safety Plus
- Manual Handling



# Appendix 5 - Practice Learning Environment Audit Profile

SECTION 1: PLACEMENT SUMMARY		
Placement Status		Please indicate (X)
	AUDIT	
	APPROVAL	
Date of Audit		
Name of The Practice Learning Environment		
Organisation		
e.g. NHS Lothian / LA / Private / Voluntary		
Address		
Name and Title of Contact(s)		
Telephone Number of Contact(s)		
Email Address of Contact(s)		
Nature of Placement		Please indicate (X)
	Acute	
	Rehabilitation	
	Community	
	Outpatients	
	Other	



Remit	
Speciality: e.g. medical (cardiology/renal/	
respiratory), community rehab, care of older people, acute mental health etc	
Age and gender (if appropriate)	
Type: e.g. traditional, PAL, project	
Misc: Travel requirements within placement	
Staffing	
<b>eg</b> . Number/discipline of staff, experience level, specialities, expected change in next 18 months	
Other students in the department	
Facilities	
e.g. meeting space, self-directed directed-study area, changing facilities	
*Will the student need use of a laptop/desktop	
Travel to Placement	
e.g. Parking availability for students / public transport to practice i.e. Bus numbers, train	
Accommodation	
e.g. nursing accommodation, local known providers	



Other relevant information:

SECTION 2: STUDENT PROFILE			
Proposed placements	Student Level	Number	
<u>Possible</u> number of student placements	Year 1 student		
	Year 2 student		
	Mobility student		
	Consolidation student		
	Total Number of Students		
	4	±	
Opportunities realised	Student Level	Number	
Number of student placements over audit period (last 2 years)	Year 1 student	**************************************	
	Year 2 student		
	Mobility student		
	Consolidation student	<u> </u>	
	Total Number of Students	<u>+</u>	

SECTION 3: SIGNATORIES	
University Lecturer/Auditor	
Practice Educator	
Staff Member Completing Audit	



# Appendix 6 – Self Certification Form EDINBURGH NAPIER UNIVERSITY

## STUDENT SELF CERTIFICATION FORM

Complete this form if you are unable to obtain evidence in support of your mitigating circumstances or other absence.

If the number of days your studies are affected is more than seven, self-certification cannot be accepted except under exceptional circumstances. It is expected that evidence would be available for any circumstances with a longer duration.

Name:			
Matriculation Number:			
Programme of study:			
Reason for absence:			
Dates of sickness:	From:		
	To:		
Was your absence certificated by your GP? YES / NC		YES / NO	
If absence was not certified by a GP, please specify why you were not able to obtain evidence:			
I declare that the information I have provided in this form is correct and complete.			
Student Signature:			
Date:			



# References

Health and Care Professions Council. (2019). *Raising a concern – guidance for whistleblowers*. <u>https://www.hcpc-uk.org/globalassets/resources/policy/whistleblowing-policy.pdf?v=63734814245000000</u>

Health and Care Professions Council. (2024). *Guidance on conduct and ethics for students*. <u>https://www.hcpc-uk.org/globalassets/resources/guidance/guidance-on-conduct-and-ethics-for-students.pdf</u>

The Royal College of Occupational Therapists. (2019). *Learning and development standards for preregistration education*. <u>https://www.rcot.co.uk/practice-resources/rcot-publications/learning-and-</u> <u>development-standards-pre-registration-</u> <u>education?gad\_source=1&gclid=EAIaIQobChMIicSKv5fAiAMVb5VQBh292w4gEAAYASAAEgJqMPD\_B</u> <u>wE</u>

The Royal College of Occupational Therapists. (2021). *Professional standards for occupational therapy practice, conduct and ethics*. <u>https://www.rcot.co.uk/publications/professional-standards-occupational-therapy-practice-conduct-and-ethics</u>

The Royal College of Occupational Therapists. (2022). *Career development framework: Guiding principles for occupational therapy*. <u>https://www.rcot.co.uk/publications/career-development-framework?gad\_source=1&gclid=EAIaIQobChMI\_IGWzaXHiAMVK5BQBh1icB8qEAAYASAAEgKcxfD\_BwE</u>