

# AHP Careers Fellowship AHP Fellows 2019





#### Judith Balfour Lothian (Physiotherapy)

In the past few years there has been a considerable increase in the number of physiotherapists working in primary care teams who are offering treatment and intervention to people with musculoskeletal issues. It is likely that the demand for these services will continue to grow. Judith plans to investigate the expectations, workload and educational preparation of these physiotherapists to ensure they are prepared to deliver a safe, effective and efficient model of care. Her project will build on, and contribute to, the work that is already happening national and locally to support the role of AHPs in primary care.



#### Rhona Burch Greater Glasgow and Clyde (Physiotherapy)

Rhona points out that physiotherapists working in the acute sector routinely see people with alcoholic liver disease and alcohol misuse. However, there is little evidence regarding the role of physiotherapy with this group of people in the acute environment (although there is positive evidence about physical activity and alcohol abstinence, symptom management and recovery within more specialised units). Rhona therefore plans to gather information about the physiotherapy approaches and treatment strategies used across Scotland, with a view to establishing an evidence base for the role of physiotherapy and physical activity in an acute environment with people experiencing alcoholic liver disease and alcohol misuse.

#### Emma Cavanagh Forth Valley (Physiotherapy)

NHS Forth Valley Community AHP services are currently redesigning their Single Point of Referral (SPR). Emma will lead work to change their referral process from one which is administrative to one which is based on enhanced triage and conversations. The aim is to invest time in really understanding who is concerned, what the concern is, and which results in the provision of appropriate reassurance, education and signposting (based on the person's concern) and growing self-management confidence and capacity. Crucial to this is education for staff around having good initial conversations which support the fundamental component of the model of enhanced triage and understanding concerns and responsibilities.



#### Tom Costelloe Lothian (Speech and Language Therapy)

Tom wants to understand more about why children and families struggle to attend Speech and Language Therapy and other services, and in doing so, help families to be able to engage with the services when they need them. He plans to reach families through working with a wide range of stakeholders, including Barnardos, to understand the barriers and circumstances that can often lead to a cycle of 'Did not Attend' letters and communications. He'll use the information he gathers to develop a tool for health services that enables graded support for engagement depending on the needs of the family and allows for movement between the levels of support as families become empowered and more able to independently engage with services.



#### Katie Elliott Forth Valley (Occupational Therapy)

NHS Forth Valley stroke units are already committed to goal setting with people who have experienced a stroke. Katie wants to work with individuals, their families, carers and staff to ensure that goal setting is done in a way that is individualised, person centred and built around people's personal outcomes. She'll support the learning and development of AHP therapy assistant staff and the wider MDT. Importantly she will work collaboratively with people who have had a stroke (and their families/ carers) to use Forth Valley's 'my stroke folder' as a way of identifying and then focusing on outcomes that matter to people. In doing this she aims to positively influence the approach used across the rehabilitation services.

#### Louise Gibson Lanarkshire (Dietetics)

In her application Louise made a strong case for why maternal expressed breast milk (MEBM) is the feed of choice for use on the neonatal unit (if available). Her passion to improve the nutritional knowledge and care of neonatal infants as a way of contributing to improved outcomes for the infant is very clear. She plans to develop learning resources and guidance for staff to improve nutritional knowledge and implement best nutritional practice on the neonatal unit. A local priority is to increase breastfeeding rates so, ultimately Louise hopes her project will help to make sure more babies are discharged on breast milk feeds.

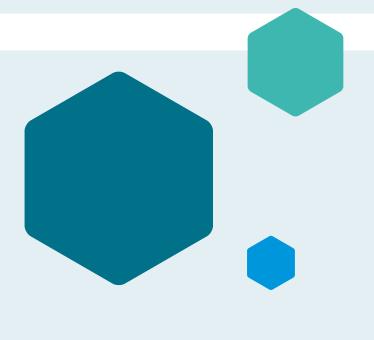




#### June Gordon Grampian (Occupational Therapy)

NHS Grampian AHPs have been working with colleagues in NHS Greater Glasgow and Clyde to embed a risk enablement approach. They are aiming for a risk enablement approach in healthcare to become the norm rather than the exception and for this to support rights-based practice and person-centred care. They are re-developing the existing risk enablement frameworks and now plan to test and implement across a wider AHP service group using quality improvement methodology.





#### Ashleigh Gray Fife and Alzheimer Scotland (Occupational Therapy)

Journeying through dementia is a supported selfmanagement occupational approach of benefit in the early stages of dementia. During the original research that underpins the approach people with dementia were clear that they wanted to continue to be active, wanted to engage in groups that did not just talk about the diagnosis but offered advice and support of how to continue to live well with the condition. Ashleigh will support two sites (in Fife and Aberdeen) who are currently using *Journeying through dementia* to evaluate its impact, share the learning and build knowledge of what works. By doing this it will enable AHPs to target support most effectively.

#### Claire James and Caroline Graham Lanarkshire (Podiatry)

Podiatry services in Lanarkshire are looking to develop a more uniform, structured, valuable and informative approach to supporting people who are newly diagnosed with diabetes. Claire has already reviewed the podiatry service to people newly diagnosed with diabetes and has identified a need to deliver the service in a different way. The focus will be on prevention, self-care and self-management to avoid complications. The project will support the podiatry technician and registered podiatrists to deliver structured individual and group education and build a robust preventative approach.



#### Rebecca Kellett Lothian (Speech and Language Therapy)

Rebecca and colleagues plan to roll out a guidance manual for care home staff which will improve support for people who experience difficulties eating and drinking (especially people with dementia). The idea came after an increase in referrals to SLT and an audit suggesting that many eating and drinking problems could be self-managed if staff had the appropriate knowledge and skills. Rebecca learned in the testing phase that it's not a simple case of just giving care homes the manual. Engagement with each care home is key to ensuring that the guidance is used in a way that is meaningful, embedded and results in sustainable change. She will also work with the Care Inspectorate to make sure it will be in line with their inspection guidelines.



#### Deborah Little Dumfries (Speech and Language Therapy)

Through her Fellowship Deborah aims to support children with communication difficulties on the often complex path to becoming autonomous communicators using Augmentative and Alternative Communication (AAC) methods. She will plan, support and evaluate a targeted level intervention to enable staff in school-based learning centres to integrate Aided Language Stimulation (ALgS) within their teaching approaches. As part of her project she will train and advise education staff, offering practical support and through her evaluation she will contribute to the evidence base for this approach. Learning will be shared throughout the region which will allow replication of the project.

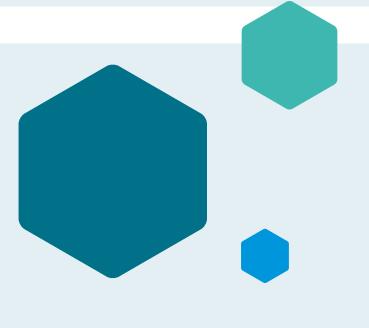
#### Gillian Maxted and Clare McKenzie Lanarkshire (Dietetics)

Morbidity, reduced quality of life and mortality rates associated with liver disease have risen significantly and malnutrition is one of the factors that can result in poor outcomes for people. Ensuring that nutritional issues are addressed from the outset will promote improved quality of life. Gillian and Clare plan to explore the outcomes for people who receive targeted advice in the early stages of disease as part of a pilot clinic.

#### Wendy Meldrum Tayside (AHP Support Officer)

Wendy will lead the development of evidence-based assessment and clinical record documentation for 3 professions initially (Arts Therapy/Music Therapy/ Podiatry). This will contribute to the Information Governance workstream of the AHP Clinical, Care and Professional Governance Framework, 'Quality AHP Services for Everyone'. She will collate all AHP patient record documentation, looking for any variation or duplication across the 3 main regions within Tayside. She will seek agreement on final documentation which meets HCPC requirements and which supports a focus on personal outcomes. Her project will help to ensure all NHS Tayside AHP documentation meets organisational standards.





#### Ruth McLauchlan Fife Health and Social Care (Physiotherapy)

The Fife adult musculoskeletal physiotherapy service is looking to expand its delivery options beyond the one to one appointments or group exercise therapies traditionally offered. Rather than deciding what the new options could be, Ruth will lead a project using co-production approaches to explore and co-design potential delivery options. The project will include people who use services, people who could use services (but perhaps don't access them), people who refer, staff who deliver services and other stakeholders. It will look at different aspects of the physiotherapy experience from initial contact through to delivery of physiotherapy services and discharge. The aim is to develop new and innovative ways of delivering adult MSK physiotherapy services.

#### Claire Muir and John Tougher Highland and GGC (Physiotherapy and Podiatry)

Claire and John will continue work which has already started to create and disseminate a centralised evidence base practice resource for musculoskeletal (MSK) AHPs across Scotland. The resource will provide support for MSK AHPs to communicate nationally, work together, share work and exchange ideas. Importantly, it will engage AHP students, create a strong link between clinicians and the academic side and, in doing this, hopefully influence future research priorities. This work is supported by the MSK national expert panel and contributes to the MSK work strand in AILP. It aims to improve access, efficiency, and quality, with enhanced experience for people using services, by providing easier access to EBP for AHPs in Scotland (via a single national site).





### Lesley Royer Lothian (Physiotherapy)

Clinical based simulation is an increasingly utilised and recognised learning tool to support staff education and development, but the focus to date has mainly been within a medical and nursing context. Lesley plans to design and implement clinical based simulation for respiratory physiotherapy within the acute hospital setting. By doing this she aims to support physiotherapists to maintaining skills in the assessment and treatment of the acutely unwell patient when not working in this clinical area on a regular basis. She will link in to other work going on at NES focused on developing and maintaining clinical skills in the practice setting.



#### Nicola Shirkey Tayside (AHP Support Worker) Nicola plans to extend the use of exper Performance Storytelling with clients we disabilities. Storytelling can provide a arts experience for people who have condifficulties and complex health and so

Nicola plans to extend the use of experiential Interactive Performance Storytelling with clients with learning disabilities. Storytelling can provide a multi-faceted arts experience for people who have communication difficulties and complex health and social care issues that result in significant health inequalities. The provision of this experience for people who are sometimes the most excluded in society can provide benefits of self-expression, performance skills, communication skills, develop relationships and build confidence. Nicola will develop her own skills and resources to support people with learning

disabilities to become storytellers themselves, and to use these skills in gaining employment/vocational opportunities.

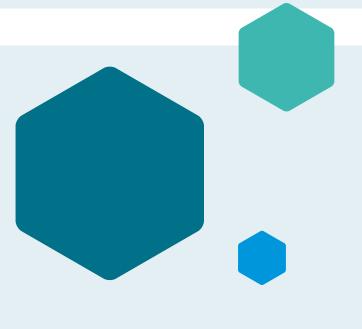
#### Jason Stanley Greater Glasgow and Clyde (Diagnostic Radiography)

Jason's project focuses on the education needs of non-medical staff when they are referring people for imaging examinations. He will scope current referral practice, look at variation and identify any education currently received by non-medical referrers. Jason will use this data to inform the development of an education package. He will work with Health Physics and AHP colleagues to identify the best methods for delivery of the education package and disseminate it across the health board. Depending on the outcomes of this work he will consider making it more widely available and disseminating it further afield as appropriate.



Janet will work closely with older people in "their spaces" (lunch clubs, coffee groups, Church Groups), using co-production approaches to design, deliver and evaluate falls prevention sessions. She will recruit "Falls Ambassadors" from these groups to then run similar sessions for other community groups. Ultimately her aim is to increase people's awareness of the steps they can take to reduce their risk of falls and feel empowered to assess and manage their own risk. Communications students from Robert Gordon University will work alongside Janet to produce a teaching resources which will be used by the ambassadors.





#### Andrea Wood Lothian (Physiotherapy)

Traditionally, the focus of care in a Paediatric Critical Care Unit is on management of critical illness and reversal of organ failure. Children and young people who are sedated and/or remain in bed for prolonged periods of time may only receive passive movements sporadically. This can have a long-term impact on the child's anatomy, physiology and quality of life for the child and his/her family. Andrea plans to implement MDT early mobilisation to improve outcomes for critically ill children. She will audit current practice, engaging all stakeholders in the evidence and developing protocols and guidelines to establish safe early mobilisation of patients taking into consideration not only age but developmental stage and, finally, reviewing the results and making changes.

#### Kirsty Paton and Gillian Flannigan Dumfries and Gallloway and Lothian

Kirsty and Gillian are testing out the role of an Assistant Practice Educator, learning from and building on work that has been happening in NHS Grampian and other places. They will support AHP HCSW's and other people (such as team leads, line managers etc) to understand and use the HCSW Learning Framework in role development, appraisal processes and learning. They will be responding to AHP HCSW learning needs and, importantly, work in ways that take into account what we know about the preferences and ways of learning that AHP HCSW tell us suit them best. A big part of their work will be to evaluate the impact of the role to influence future developments.





## **AHP Careers Fellowship**

This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email **<u>altformats@nes.scot.nhs.uk</u>**.



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