Building Bridges

An allied health professional practice education programme at Alzheimer Scotland 2013–2016

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Abstract

This paper considers the role of a third sector AHP practice education programme in preparing a future AHP workforce for working with people living with dementia and their families within a changing landscape of health and social care integration. It looks at the need for dementia-ready practitioners and reflects upon the introduction, development and outcomes of a programme of AHP student placements, internships and volunteering designed to meet this need in Scotland’s leading dementia organisation. There is a focus on the structures required to support an environment conducive to creative and innovative learning and an opportunity to take a look at some of the positive outcomes of the project. Finally, attention is turned to sustainability of such programmes within Alzheimer Scotland and the potential learning and transferability of the model to other third sector organisations in Scotland.
An estimated 90,000 people in Scotland have dementia in 2017, around 3,200 of whom are under the age of 65. By 2020, it is estimated that there will be around 20,000 new cases diagnosed each year. The Scottish Government made dementia a priority in 2007 and continues to work with key organisations such as Alzheimer Scotland - Scotland’s leading dementia organisation - to address the impact of dementia. Support for people living with dementia and their families spans sectors and the landscape is continuing to shift with the major structural reshaping and integration of health and social care in Scotland that has at its heart, “ensuring that those who use services get the right care and support whatever their needs, at any point in their care journey” (Scottish Government 2016).

In this context, Alzheimer Scotland was commissioned by the Scottish Government to produce an evidence based policy document outlining the contributions of AHPs to ensure implementation of the 8-Pillar model of community support (Alzheimer Scotland, 2012). Connecting People. Connecting Support was published in 2017 and the policy and all the evidence informing the policy can be sourced here www.alzscot.org/ahp.

If the aspiration is for our future AHP workforce to be prepared and skilled for work in the area of dementia, all AHP students must have access to opportunities to develop their dementia skills, knowledge and confidence as outlined within the Promoting Excellence Framework (Scottish Government 2011).

However, whereas AHP student placements are well established in NHS or local authority services, they have not been fully integrated within the third sector. Consequently, AHP trainees traditionally will not cross paths with people living with dementia until a later stage of the disease, or in a crisis situation and only within a public sector setting. In order to provide a contemporary practice education experience that provides new AHPs with up-to-date dementia skills, a fresh approach that involves working in partnership with people living well with dementia and in the community within a range of community settings and services is required.
The Alzheimer Scotland AHP Practice Education Programme is a partnership approach to supporting our future AHP workforce to develop their dementia practice in line with Promoting Excellence Framework at the informed and skilled levels (Scottish Government, 2011) through offering students:

- Experience of working with people living with dementia and their families, therefore contributing to the skills of the future AHP workforce.
- First-hand experience of Alzheimer Scotland as the leading organisation in dementia.

And people who come to Alzheimer Scotland:

- The opportunity to work with a range of allied health professionals for mutual benefit.

The Alzheimer Scotland AHP Practice Education Programme was established in 2013 in the context of a wider commitment to bringing AHP practice to the forefront of dementia services, the publication of Scotland’s National Dementia Strategies (Scottish Government 2013 & 2017) and the creation of the Promoting Excellence Framework (Scottish Government 2011). Sitting within the wider context of Connecting People, Connecting Support, the programme builds on evidence from the literature on role emerging placements (Clarke et al 2014) and also upon the practice base evidence within contemporary AHP placements in Scotland such as the successful programme of placements for student AHPs within the care home sector led by Edith MacIntosh, the then AHP Rehabilitation Consultant and facilitated in partnership between NHS Education for Scotland, Glasgow Caledonian University and the Care Inspectorate.

In addition to student placements, Alzheimer Scotland has worked with partner organisations to develop short-term internships for new graduates and students approaching graduation. Internships offer a well-supported opportunity to build on professional dementia skills in preparation for entering the workforce as a fully-fledged dementia ready AHP. By the end of summer 2017, 8 Occupational Therapy Interns and 1 Music Therapy Intern will have contributed their AHP approach. Interns have shared their experiences in regular blog updates.

There are also volunteering opportunities that are specifically linked into the AHP work within Alzheimer Scotland. This paper however focuses specifically on the work happening with AHP Students Practice Placements.
Pioneering AHP Placements

Since the project was initiated in 2013 with the introduction of Occupational Therapy placements, there has been a steady growth in the number of AHP students carrying out placements and experiential visits within the organisation and it is hoped that this can be further developed to include further AHP professions and additional Alzheimer Scotland services. From a starting point of aiming for 30 AHP student placements as outlined in Alzheimer Scotland’s strategic objectives, by the end of 2016-17, over 100 AHP students and AHP interns will have spent time in Alzheimer Scotland services. Placements at Alzheimer Scotland may be brief experiential visits or more extended work within the organisation over the course of a semester or throughout the academic year.

Not every trainee AHP will become a dementia specialist but all will have contact with people with dementia. It is important that this wider group of new AHPs are confident dementia skilled practitioners and this programme is supporting two levels of skilled outlined in promoting excellence framework

1. Dementia informed learning experiences
2. Dementia skilled practice placements
Dementia Informed Learning Experiences

Dementia Informed Learning Experiences are aimed at AHPs early in their training, ideally in their first or second year. The focussed package comprises of: an introduction to Alzheimer Scotland and Dementia Friends session, one or two visits to Alzheimer Scotland day services or dementia cafes with a built-in feedback and reflective session facilitated by the Alzheimer Scotland AHP Practice Educator Facilitator/AHP Consultant and the university lecturer where students are encouraged to reflect on their experience and share learning. Students are also encouraged to view the informed about Dementia films which can be sourced here http://www.knowledge.scot.nhs.uk/home/portals-and-topics/dementia-promoting-excellence/framework/informed-level/learning-resources.aspx

Over 2 academic years, 72 students took part in with positive and impactful results:

- **56 Speech and Language Therapy Students** over two years from the University of Strathclyde visited Alzheimer Scotland Daycare Services in the West of Scotland
- **16 Dietetics students** from Queen Margaret University visited Alzheimer Scotland Dementia Cafes in the Lothians.

During a facilitated session back at university, students were then invited by the Alzheimer Scotland AHP Practice Educator Facilitator to answer one simple question:

**During your visit to Alzheimer Scotland, what was important for you?**

“What mattered to me was seeing real people with dementia as it is something I have had very little contact with and I know that there are many pre-conceptions that people have about the disease and I wanted to challenge these ideas. I also wanted to see how the third sector plays a part in dementia care and to see if I wanted to get involved in my Speech and Language Therapy career.”

“The important thing for me - that I took from my Alzheimer Scotland visit - was that dementia does not have to negatively impact those who live with it. The centre I visited was a really positive place and it was clear that members enjoyed the social aspects as well as the activities. The day service allowed them to do things they may not otherwise be able to do. It made me realise that dementia affects people in different ways and does not have to limit them or their abilities.”
Longer practice placements provide AHP students with an opportunity to work towards becoming skilled dementia practitioners often in their third or fourth year. AHP students spend a number of weeks in Alzheimer Scotland services, applying and adapting their profession specific theory to practice in a non-traditional context. Completing the dementia skilled learning resource is recommended alongside the placement learning experience. A copy of this resource can be found here: www.sssc.uk.com/about-the-sssc/multimedia-library/publications?task=document viewdoc&id=544

Student AHPs are supported to meet their learning objectives by a named work based mentor within Alzheimer Scotland and by an HCPC Registered Supervisor from their own profession within the NHS, Social Services or the University.

Between 2013 and 2016, a total of 28 AHP students completed an Alzheimer Scotland Practice Placement:

- 17 Occupational Therapy Students (Queen Margaret University, Glasgow Caledonian University, Robert Gordon University, York St John University and Glasgow Clyde College)
- 2 Music Therapy Students (Queen Margaret University)
- 6 Art Psychotherapy Students (Queen Margaret University)
- 2 Physiotherapy Students (Queen Margaret University and Glasgow Caledonian University)

AHP students in Alzheimer Scotland learn within services where there is no previous history of dedicated input from their profession although some AHP’s maybe employed by Alzheimer Scotland but in roles of dementia advisors, link workers or services managers. However these placement experiences are viewed as a role-emerging in their nature. This “working from scratch” and “role-emerging” nature of the experience provides the student with an exciting opportunity to develop professional skills and understanding relevant to contemporary practice and applicable to a third-sector organisation.

“...the autonomy demanded in role-emerging placements requires students to work out for themselves what occupational therapy can offer in the setting and what it means to them. This requires a depth of reflection that challenges their own and existing practices and helps them construct their own professional identity rather than passively accepting the identity, ways of being and practices of others.”

(Clarke et al 2014)
Models of AHP Practice Placement

As we have developed an understanding of what works best, two models of practice placements have emerged including Alzheimer Scotland hosted full placements and NHS & Alzheimer Scotland Split Placements.

**Alzheimer Scotland Hosted Full Placements**

were developed for art psychotherapy, occupational therapy and music therapy.

**Art Psychotherapy** placements are offered to MSc Art Psychotherapy students in their second year of training or in their first year of training for those with previous directly relevant experience. Students spend 2 days per week at the Alzheimer Scotland service between September and May. Art Psychotherapy placements can take place in a Dementia Resource Centre or a Day Care Service but potential for individual sessions as well as group work is important. A named work based mentor at Alzheimer Scotland provides support and supervision and students attend a weekly supervision group facilitated by an art psychotherapist at the university who also completes the placement assessment with input from the Alzheimer Scotland work based mentor.

**Occupational Therapy** placements are offered to students close to the end of their training and with a good basis of understanding of the profession on which to build. (BSc final year or MSc final year). Students are based at Alzheimer Scotland for the duration of their placement, usually 4 or 5 days per week for a number of weeks. Occupational Therapy Placements can take place in a Dementia Resource Centre or a Day Care Service and some outreach work is also possible. A named Alzheimer Scotland work based mentor provides on-site supervision and an Occupational Therapist from a local NHS community service provides weekly support from a professional perspective and takes ultimate responsibility for assessments.

**An Occupational Therapy Support placement** (HNC Level) is offered within an Alzheimer Scotland Day Care service. An Alzheimer Scotland Mentor is identified and contributes to weekly assessment paperwork. The university lecturer provides long-arm supervision and completes the final assessment with input from the Alzheimer Scotland Mentor. This placement extends from November until May with the student being on placement 2 days per week.

**Music Therapy** placement was offered to an MSc Level 2 student. Students spend 2 days per week at the Alzheimer Scotland service between September and May. Music Therapy placements can take place in a Dementia Resource Centre or a Day Care Service but potential for individual sessions as well as group work is important. A named mentor at Alzheimer Scotland provides support and supervision and students attend a weekly supervision group facilitated by a music therapist at the university who also completes the placement assessment with input from the Alzheimer Scotland work based mentor. The NHS and Alzheimer Scotland split placements at the time of writing this report were developed for physiotherapy

**Physiotherapy** students, in their final year of study (MSc or BSc) are offered the opportunity to spend 2 days per week at an Alzheimer Scotland service during their NHS hosted placement. An Alzheimer Scotland mentor is identified and close communication between the NHS Physiotherapy supervisor and Alzheimer Scotland Mentor is key to a successful placement. The placement sits within the NHS primarily and the NHS Physiotherapy Supervisor takes responsibility for assessments, with input from the Alzheimer Scotland work based mentor.
Common Threads in the AHP practice based models

Alzheimer Scotland provides a variety of supports and services which have been integral to the learning opportunities for the AHP Building Bridges programme.

AHP students have linked in with staff in dementia cafes, day care services and dementia resource centres. Some of the work has been in people’s homes or with the wider community. Accordingly, the AHP student’s role will very much depend on the type of service in which they are placed and the role of the staff mentor and team where they are based. With the help of their on-site Alzheimer Scotland work based mentor and AHP supervisors, the students must apply their profession specific knowledge in a way that fits with the placement setting and a third sector organisation. Students have combined an openminded approach with equal measures of perseverance and determination to complete a variety of projects in response to the needs of people using services and within the context of meeting learning objectives as set by the university.

As the programme has developed, AHP students have contributed to local services in a number of creative and innovative ways that are reflective of the rights-based, person centred approaches that are central to both Alzheimer Scotland and the Allied Health Professions. The compatibility of AHPs who positively promote and demonstrate commitment to enabling supported self-management and self-directed support as determined by the needs and capacities of their service users and an organisation that acknowledges that each person will need a unique approach is clear but the successful outcomes of student projects provide us with evidence of the result of this well-matched partnership.

Projects have been as diverse as professional approach and more details are available at within local services and we are developing methods to share the work as an organisation nationally.
AHP students are invited and supported to engage in using social media as a means of connecting with others and sharing their learning whilst on placement at Alzheimer Scotland. This has enabled an active role in wider professional conversations and within a community of people interested in working to improve lives for people living with dementia. Twitter, Instagram and the Lets Talk about Dementia blog

A set of guidelines, a power point presentation and a short film on use of Instagram have been developed and are available to students on placement at Alzheimer Scotland. A few examples of blog posts are available in Appendix 3 and can be followed here letstalkaboutdementia.wordpress.com/

In addition to the use of social media to make their work visible, there have been a number of successful conference submissions with poster presentations giving further opportunity for spreading the word and sharing the good work. And a poster that gives an overview of the full programme can be found here www.alzscot.org/assets/0002/5369/building_bridges_final.pdf.

It also has been important to look at how projects can be shared fully within Alzheimer Scotland so that rather than spend time reinventing wheels, students and the people supporting them can build upon the good work happening elsewhere in the country. The Alzheimer Scotland internal communication network, ALIS is one way of doing this. Once a placement is finished, work is being developed to share the projects on the intranet system and enabling the work to be available nationally within Alzheimer Scotland.
Collaboration and commitment

Creating the right circumstances to support an educational experience that potentially inspires creativity and solidifies professional identity within the role-emerging placements at Alzheimer Scotland has involved close collaboration between key partners. None of the placements would happen without the commitment and enthusiasm of the people involved in supporting the aims of the Practice Education Programme.

Building Bridges: initiating and establishing connections between the organisations involved and the people representing them has been a core element of the project. Initial reaching out and early conversations about potential partnership opportunities have developed into formalised placement agreements and in the case of Queen Margaret University, a strategic alliance signed by the University’s Principal and the Chief Executive of the Alzheimer Scotland that further formalises the commitment to partnership in supporting a dementia aware university for all students, AHP student education at both pre and post registration.

As the programme continues to develop and grow, the number of Higher Education Institutions, Alzheimer Scotland services, NHS boards and other partnership organisations participating in the programme is expanding. There is an ongoing process of connecting AHP programmes with services in a meaningful way that both serves the needs of the developing AHP students and the people using the services. Once placement agreements have been established with input from all sides, there is then a requirement to ensure that students have adequate and appropriate support for the challenging task of learning within a role-emerging context and that the placements continue to meet the NES Quality Standards for Practice Placements (NHS NES 2008)

Central to the process of ensuring a coordinated approach that works for everyone involved ensuring a good quality and governance learning opportunity are the roles of AHP Consultant and AHP Practice Education Facilitator in Alzheimer Scotland.
Capture the impact

Most AHP placements occur just once in the annual academic calendar and with each annual cycle, arrives a fresh opportunity to review and refine processes, to further distil shared knowledge and experiences. At the end of each AHP practice placement experience, students and supervisors are invited by the AHP Practice Education Facilitator to complete a detailed evaluation form mapped to the aims of the project and the Quality Standards for Practice Placement (NHS Education for Scotland 2008) so that the work can be built upon annually.

All AHP students on placement at Alzheimer Scotland services are encouraged to routinely engage in conversations with people living with dementia, focussing on making sure that practice is informed by what people really need. To help facilitate this process, one simple question is asked, “…what was important for you?” Our newly designed postcards are a means of prompting these conversations and recording experiences so that we can work in a way that is continually informed by those people directly involved in the services we provide.

In addition to using evaluation forms and questionnaires, an event based on an Appreciative Inquiry model allowed us to gather together with all stakeholders to reflect on and envision the best ways of supporting AHP student placements together. This day, facilitated by FMA Associates, generated energy and ideas for going forward that have been developed as the programme has moved forward. A brief report is available at www.alzscot.org/ahp

At Alzheimer Scotland, students are given a questionnaire at the end of their placement and responses reflect the benefits of being challenged to work autonomously at this later stage in their training.

“The placement pushed me to take initiative when it came to my learning and has allowed me to gain confidence in my skills and abilities, as well as, to create and implement things I would have never have thought of doing. ……”The placement has taught me the necessity of evaluation and has illuminated the role of occupational therapy in dementia care.”
Towards Sustainability

Building and weaving the Alzheimer Scotland AHP Practice Education Programme has been a rich learning opportunity for all involved – not just for the AHP students on placement. Having introduced a number of AHP placements and having begun distilling the learning to move towards models of good practice, it is now time to look ahead.

The next phase of the programme is focussed on sustainability. How best to ensure that our future AHP workforce is prepared for working with people living with dementia in the context of a changing health and social care environment and what is the role of Alzheimer Scotland to support this learning. The overall aspiration is that all AHPs are prepared to meet the needs of people living with dementia in line with Promoting Excellence at skilled practice level as outlined in, Connecting People, Connecting Support (Alzheimer Scotland 2017) upon entry to the workforce now and in the future. This should be a high quality learning programme that facilitates a high level of excellence educationally, that meets the Quality Standards of Practice Placement across services, that responds to feedback for all involved and that ultimately serves the growing population of those living with dementia. For this to happen, it is crucial that the AHP practice education programme is firmly woven into the fabric of the organisations involved. Further development of systems and processes centrally, locally and in partnership seems important; linking the right people, in the right places in a national partnership approach.

The need for forward looking AHP education that responds to changing contexts and allows for emerging creativity and passion extends beyond working to meet the needs of a growing population of people living with dementia. Programmes of non-traditional AHP placements could feasibly be introduced within other third sector organisations supporting people across the life span and in a range of contexts. Already, individual university programmes are reaching out to work with third sector organisations and some relationships are indeed well established. However, the idea that a third sector organisation would run a full AHP student programme, building up this work from the inside and developing good models of practice on a national level seems novel. It is possible that a range of organisations and ultimately the people they serve could benefit from the introduction of this more cohesive approach to integrating AHP education within third sector services. Within Alzheimer Scotland, the ability to test and pilot the role of an AHP practice education facilitator within the organisation has been of key value. Within any organisation hoping to develop a programme of progressive and cohesive AHP education that is rooted in the needs of the service user and within the service philosophy, it would seem sensible to test a similar AHP practice education facilitator model within the organisational structure.
Next steps

Dementia is an expanding issue and if AHPs are to be able to direct their highly relevant skills and expertise towards meeting the needs of people with dementia where they are at within available services, opportunities for practice education within a range of dementia services and at an early stage in AHP career development is essential.

Within Scotland’s leading dementia organisation, there is an opportunity to work in a way that fits with evolving national and local dementia services to build meaningful relationships and systems that support sustainable AHP education and practice and connect to people who are living with dementia and those that support them.

There are developing resources available to support students: staff expertise, networks of support and positive partnerships, high quality information and influential and innovative policy frameworks. Alzheimer Scotland operates on a national level with supporting local resource centres offering a range of day services and supports. It is possible to accommodate students from all of the HEIs providing training for our future allied health professionals. It is anticipated over the next two years to build on the work that has been developed through this initial Building Bridges programme and embed the work to local Alzheimer Scotland services.

For AHP dementia education to continue to grow and flourish in ways that we may not yet even be able to imagine, we will continue to work in partnership to support the ambition of Connecting People. Connecting Support where “people living with dementia will experience services that are led by AHP’s who are skilled in dementia care” and Alzheimer Scotland are committed over the next two years to create and support the right learning conditions to make this happen.
References


Alzheimer Scotland 2017 Connecting people, connecting support: Transforming the contribution of allied health professionals in dementia in Scotland 2017-2020

Clarke C de Visser R Martin M Sadlo G 2014 Role-emerging placements: a Useful model for Occupational Therapy Practice Education? A Review of Literature The higher Education Academy 2(2) 14-26

Scottish Government 2011 Promoting Excellence: A Framework for all Health and Social Services Staff Working with People with Dementia, their Families and Carers. Scottish Government Edinburgh


NHS NES Quality Standards for Practice Placements (NES 2008)

Supporting materials

The following supporting materials can all be found at www.alzscot.org/ahp folder “Building Bridges”

Interim Evaluation Report
NHS GG&C OT Partnership & GCU Student Placement Project with Alzheimer Scotland

Building Bridges: A Conversation to Explore AHP Practice Education at Alzheimer Scotland

Benefits of Contemporary placements in non-traditional settings
vimeo.com/159229661

Evaluation: Alzheimer Scotland occupational therapy placements 2014

AHP placements – occupational therapy placements in Alzheimer Scotland
vimeo.com/album/4583219/video/129880962

Thank you to all our stakeholders and partners in this project including Alzheimer Scotland staff, Queen Margaret University, Strathclyde University, Glasgow Caledonian University and Glasgow Clyde College.

Thank you to all the AHP students who have joined us at Alzheimer Scotland and have been willing to try a new practice placement experience.
Appendix 1

Supporting the AHP Placements – Who’s who?

The AHP Supervisor
In line with HCPC Standards of Education and Training (HCPC 2014), “Practice placement educators must be appropriately registered, unless other arrangements are agreed.” (HCPC 2015). For all Alzheimer Scotland AHP placements, there is an HCPC registered practitioner who supervises the student from a profession specific point of view and within HCPC professional standards. They may be an employee of Alzheimer Scotland, a member of staff within the university or a practitioner within a local NHS board or local authority. Usually weekly contact between AHP Supervisor and student is expected and the AHP supervisor is responsible for mid-placement and final assessments.

The Alzheimer Scotland Work Based Mentor
All students are linked with an on-site mentor who acts as the main point of contact within the organisation. This role includes managerial, educational and supportive elements of supervision, drawing upon substantial knowledge of their service and a sound understanding of dementia.

The AHP Practice Education Facilitator (Alzheimer Scotland)
January 2015 saw the introduction of a new post of AHP Practice Education Facilitator within Alzheimer Scotland. The overarching remit of the role is to continue introducing and supporting a programme of AHP placements, internships and volunteering opportunities within Alzheimer Scotland services, addressing the identified need to equip a future AHP workforce for working with people living with dementia. This role, which has ensured a steady growth in AHP trainee participation in the work of the organisation is unusual in its location within a third sector organisation. It is also an emerging role that has focussed on reaching out to Universities to initiate and negotiate new placement agreements, creating and supporting new learning opportunities within Alzheimer Scotland and working to evaluate the programme, gathering feedback from all involved.

The AHP Dementia Consultant (Alzheimer Scotland)
The Alzheimer Scotland AHP Practice Education Programme sits within a wider remit to bring the skills of AHPs to the forefront of dementia practice and to share with them the principles and practice of working in a major charity that is dedicated to “making sure nobody faces dementia alone”. Overseeing this process in the AHP Dementia Consultant who is also leading on the delivery of commitment 10 of Scotland’s Dementia Strategy (Scottish Government 2017).

Alzheimer Scotland Director of Localities
The Director of Localities works with the AHP Practice Education Facilitator to ensure that practice placements are linked to services in a way that fits with Alzheimer Scotland’s operational policies.

University Lecturer (Practice Education)
The university lecturer, overseeing practice education aspects of the training programme is involved in initial negotiations to set up placement agreements, matching students to the placement and liaising with all parties to ensure that the student’s learning requirements are met in a way that is in line with specified learning outcomes and assessment arrangements.

NES PEF Programme
The PEF programme at NHS Education for Scotland have provided support and consultation with regard to applying The Quality Standards for Practice Placements (NHS Education for Scotland 2008) within a third sector placement.
Appendix 2

Promoting Excellence Framework: Levels of knowledge and skills

Each level defines the knowledge, skills and behaviours specific to the worker’s role in relation to dementia. Rather than being hierarchical, the levels are concerned with levels of responsibility in relation to working with people with dementia which will vary greatly across organisations and sectors. Each level defines the expertise, specific to their role in relation to dementia, that a worker must have, rather than in relation to their seniority within the organisation or their profession. The ‘Dementia Informed Practice Level’ provides the baseline knowledge and skills required by all staff working in health and social care settings including a person’s own home.

The ‘Dementia Skilled Practice Level’ describes the knowledge and skills required by all staff that have direct and/or substantial contact with people with dementia and their families and carers.

The ‘Enhanced Dementia Practice Level’ outlines the knowledge and skills required by health and social services staff that have more regular and intense contact with people with dementia, provide specific interventions, and/or direct/manage care and services.

The ‘Expertise in Dementia Practice Level’ outlines the knowledge and skills required for health and social care staff who by virtue of their role and practice setting play an expert specialist role in the care, treatment and support of people with dementia.

The knowledge and skills outlined at each level are constructed in an incremental way, for example staff that operate at the ‘Dementia Enhanced Practice’ level would also possess the knowledge and skills, attitudes and behaviours described at all preceding levels. Given the scope of the workforce across health and social services this framework does not identify specific health and social services staff roles in relation to the framework domains. Each individual staff member and their employer must take responsibility in ensuring they correctly interpret and apply the content and aspirations of the framework to their role in relation to working with people with dementia, their families and carers.
Let’s Talk About Dementia: Practice Education Programme
Blog Posts

The AHP led blog at Alzheimer Scotland has been a means of keeping in touch with a wide community. The following link provides access to the 26 posts by people involved in the programme.

letstalkaboutdementia.wordpress.com/

14th August 2014: Catriona Chapman: Occupational Therapy Intern
20th November 2014: 'Outside my comfort zone’- Occupational Therapy Student Placement
19th February 2015: Music Therapy and Dementia Care
5th June 2015: Music Therapy Week 22nd -28th June #MTW2015
16th July 2015: Dogs: A catalyst for Conversation and Joy in Dementia
23rd July 2015: Occupational Therapy Interns
3rd September 2015: Building Bridges
17th September 2015: ‘What’s important to me’: Living Well with Dementia
15th October 2015: Sharing Learning as an Occupational Therapy Intern
12th November 2015: Exploring Occupational therapy In Alzheimer Scotland: A Student’s Perspective
10th March 2016: Settling into an Art Therapy Placement
7th April 2016: Speech and Language Therapy Students at Alzheimer Scotland: Changing Perceptions forever
30th June 2016: Another Summer, Another Internship

14th July 2016: Informed, Skilled, Inspired
4th August 2016: “Our Top Tips” to Living Well with Dementia – Scottish dementia Working Group @SDWG
25th August 2016: Connecting People. Connecting Support- @AHPDementia on Instagram
8th September 2016: Occupational Therapy Students Become Dementia Friends
15th September 2016: “A Day in the Life of Marianne”
3rd November 2016: Allied Health Professionals – Enhancing Daily Living
24th November 2016: A New AHP Generation: 100+ Students, Interns and Volunteers in Alzheimer Scotland
26th January 2017: Student Dietitians Learn From Experience at Alzheimer Scotland
2nd February 2017: Allied Health professionals: Maximising Psychological Wellbeing: Let’s face the music…
2nd March 2017: Connecting People: Twitter – a beginners guide by beginners
9th March 2017: Connecting people, connecting support through Instagram
23rd March 2017: An AHP Workforce Skilled in Dementia Care

The AHP Interns have shared their learning through a blog specifically created by and for them: ahpalzscot.tumblr.com/
Note about the authors and the Practice Education Programme

The AHP Practice Education Facilitator (Alzheimer Scotland)

January 2015 saw the introduction of a new two year AHP Practice Education Facilitator within Alzheimer Scotland, Adrienne McDermid-Thomas. The overarching remit of the role was to continue introducing and supporting a programme of AHP placements, internships and volunteering opportunities within Alzheimer Scotland services, addressing the identified need to equip a future AHP workforce to be skilled for working with people living with dementia. The work has focussed on reaching out to Universities and local AHP services to initiate and negotiate new placement agreements, set up a governance mechanisms for the placements.

Creating and supporting new learning opportunities within Alzheimer Scotland and working to evaluate the programme, gathering feedback from all involved, including people who have contact with the AHP students and Alzheimer Scotland services.

This bridge building AHP Practice Education Facilitator is unusual and is the first, in its location within a third sector organisation. Embedding this post within the context and culture of Alzheimer Scotland has meant that the work always revolves around the needs of the person living with dementia and their family and is tightly woven in with the vision of the organisation. The AHP Practice Education Facilitator was pivotal in initiating partnerships and in advancing good practice in a way that fits with Alzheimer Scotland services and is nationally cohesive. Adrienne is an art therapist and part-time lecturer at Queen Margaret University.

The National AHP Dementia Consultant, Alzheimer Scotland

Elaine Hunter, National AHP consultant is leading on Connecting People, Connecting Support, an evidence informed AHP policy document for Scotland addressing the contribution of AHPs in supporting people with dementia and their families, partners and carers to live positive, fulfilling and independent lives. The approach advocates a multidisciplinary, multi-sectoral way of working.

The AHP Practice Education Programme at Alzheimer Scotland supports the 3rd ambition in Connecting People, Connecting Support for an AHP workforce skilled in dementia care.

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