

# The scaffolding and design of 5 weeks of simulated placement throughout a BSc Diagnostic Radiography programme

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with thanks to Emma Edwards and the whole simulated placement team

# Placement Structure

Level 4 – 2 week preparatory placement

Level 5 – 1 week consolidatory placement

Level 6 – 2 weeks of placement with a focus on leadership, autonomy and education

# Level 4 Themes

Professionalism and communication

Reflective Practice

Person centered care

IR(ME)R, DATIX and human factors

Confidentiality

MDT

EDI

Professional integrity

# Level 5 Themes

CT

MRI

Ultrasound

Theatre

Health  
Promotion/  
Screening

# Level 6 Themes

Practice Education

Major incidents

Cultural  
Competency

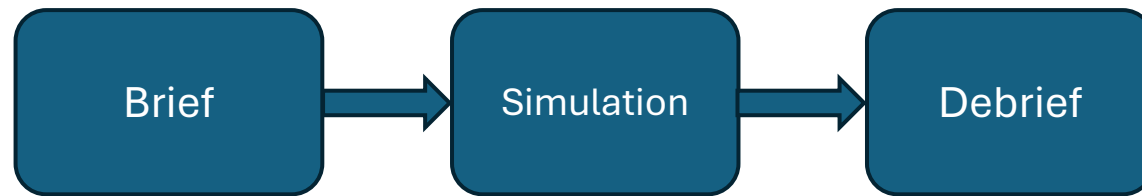
Leadership and  
mentorship

Paediatrics

Forensics

HCPC tribunal

# Placement structure



↑  
Pre-reading in  
reflective  
journal

"High fidelity" Sim  
session x 2/3

Directed study

Time for  
reflections

Time for pre  
reading

# Example activities

- High fidelity simulation
  - Radiographic examinations
  - Patient identification
  - Raising concerns in the clinical setting
- Table based activities
  - Theatre list management
- Relevant elfh training
  - MRI safety prior to MRI simulations
- Relevant image review sessions
  - Surrounding the radiographic examination simulations
- Reflection

# Scaffolding

- Internally within the placements:



- Externally through the programme:

- Similar learning outcomes used in level 4 and 6 placements, in different more complex situations
  - Raising concerns
  - Professional integrity
  - Cultural Competency



# Raising concerns

- Level 4:
  - Report a radiation exposure that needs an adverse incident report to the supervising radiographer
  - Raise to members of staff that they are acting unprofessionally
- Level 5:
  - Complete a safety questionnaire for a patient in MRI and raise a potential safety issue then feed this back to the patient
- Level 6:
  - Advocate for a member of staff undergoing bullying and harassment in the workplace
  - Take part in a simulated HCPC tribunal

# Attendance monitoring and evaluation

- Clinical hours dependent on completion of reflective journal
- Students signed in to every session by member of staff on paper timesheet – checked at the end of the week
  - Encouraged to photograph and save this regularly
- Thematic analysis of reflections
- Completion of questionnaires containing session evaluation and likert questions relating to learning outcomes of the session



## Reflective Journal

- In OneNote to allow visibility to instructors
- Pre-reading for simulations
- Directed study/elfh
- Directed reflective questions on all sessions
- Links to Questionnaires in forms



# Lessons learned

Start simulations with high equipment use later in the day

Reflect on group size

Is there technology to make the simulation more sustainable?

Revisiting learning outcomes is useful

Only have students in the role of the student where possible

Unfamiliar staff in the patient role where possible



# Any Questions?

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