The Evolution of the Peer Enhanced e-Placement (PEeP)

North West London and South West London PEEP Project

April 2024

bucks
new university

PRESENTATION OUTLINE

- Partners

- What is PEeP?

- Drivers for PEeP

- Evaluation Outcomes

- Good Practice Guide

- The Future

- Conclusion

PARTNERS

What is PEeP?

- Peer Enhanced e-Placement is a virtual placement which provides learners with quality simulated practice learning.

- The PEEP model has now been widely disseminated and adopted across multiple professions within the UK and beyond.

- Over 80 placement teams from health and social care from 20 professions and disciplines have completed a PEEP acquisition experience to date, and already over 1800 learners have completed a PEEP.

Drivers for Introducing PEeP

The vacancy rates of mental health nurses are at high levels, with increasing numbers of nurses leaving the workforce. **If changes are not made immediately, there is a high risk that this profession will be lost**

Project Population

University	Number of Learners
Buckinghamshire New University	30
Brunel University London	9
Kingston University	58 MH 7 LD
University of West London	32
Total	**136**

The PEEP took 41 learners out of total capacity for 3 weeks, both Mental Health and Learning Disability students.

Running the PEEP during the peak placement periods in the summer had a major impact on capacity, allowing many of our services that had been running over capacity for many weeks to have some respite from supervising learners.'
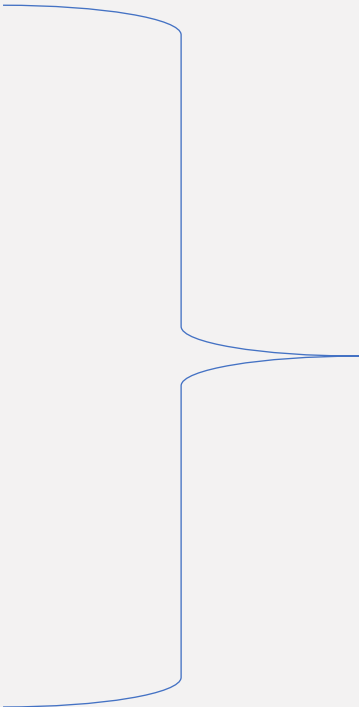
PEeP PROGRAMMES

UNIVERSITY	PEEP PROGRAMME
Buckinghamshire New University	6 week programme (December 2022–January 2023) (5 weeks online with 1 week Face: Face)
Brunel University	3 week programme (April – June 2023) (1 week placement and 1 week PEEP interspersed for a 7 week placement)
University of West London	3 ½ week programme (June 2023) (Hybrid face:face and online)
Kingston	3 week programme (June 2023) (Hybrid face:face and online)

PEeP EVALUATION

- Case study approach

- Mixed methods approach

- Qualitative data – Focus Groups and Interviews

- Quantitative data – Questionnaires

- PEEP Good Practice Guidelines

- Students/learners

- Practice Assessors/Supervisors

- Experts By Experience

- Academics

Learner/Student Feedback

Starting Placement • *Mixed Emotions* • *Virtual Placement*	*'I was nervous. I haven't worked with people with mental health issues before that, but I've worked with adults with learning disabilities, and I know this could be more intense'*
The Academic Team • *Debriefing and feedback* • *Confidence*	*'It became much easier for me, in a way, because your briefing, it was more details that you could understand what you could have done better, what you could do better.'*
I have learned • *Developing their skills and knowledge'*	*'I learnt everything about mental health nursing. I know it was more about assessment, communication, but I think it was beyond that...... so you got to know a lot, everything, physical health, mental health, how they all come together'*

Practice Assessors Feedback

A new form of Placement • Capacity • Diversity of learning experiences	*'Capacity issues within clinical environments and so to sort of give learners a taster of what their actual clinical environment is prior to them coming in. And so they would be doing simulations and they would be exposed to you know different conditions'.*
Practice Assessor Role • Role knowledge • Capacity and workload	*'For me it would be beneficial for the likes of myself to be given some guidance in terms of the completion of the ePAD, because it's new to absolutely everybody'*
It was Beneficial • Future Nurse	*' I did enjoy the bits of supporting.... you're impacting them (future nursing workforce) in a way that in the future it could be me.' and 'I would hope whatever they learned will be put in practice at that time. It would be saving somebody's life so and that bit I found rewarding that I could impact in a way.'*

Experts by Experience Feedback

Bringing the Role to Reality • Lived experience	*'Because in the script the scenario that you get it, it's all about obviously you and what you're going to do, ….. You're kind of filling in on that and maybe that's a good thing.'*
Building up the Health Professional • Skills • New areas of knowledge outside curricula	*'Which I think you could you could tell the difference from the first meeting to the last how much they're confidence had grown…Just in how they were responding, talking to you, asking the questions'*
Sharing the Experience • Community networks	*'I've been planning how I was going to change stuff as I went along, you know, so I was researching with all my groups and my community and how can I change this? Can I do it? And then this group that I have was so fascinated, they want to know the next stage of the story.'*

- Have you enjoyed PEEP?
Yes 9/9

- Do you feel more confident as a practitioner as a result of PEEP?
Yes 9/9

- Has PEEP made a difference to the way you have conversations with people?
Yes 8 Not Sure 1

- Has using the Three-Phase Conversational Model helped you when talking to people?
Yes 9/9

- Which aspects of PEEP have been most useful?
"Learning the TPCM"
"Role play scenarios with service users" (8/9)

- Which aspects of PEEP have been least useful?
"Documentation"
"Reading resources" (8/9)

- Do you feel you're a better/will be a better Mental Health Nurse as a result of PEEP?
Yes 9/9

- Do you feel PEEP helped you adjust to your first placement?
Yes 8 Not sure 1

- How could we improve PEEP?
"Have a PAD for PEEP"
"The resources were too much and too lengthy"
"Get students more involved with the development of PEEP"
"Put all group and individual exercises in a book"

Focus Group Results

I was Nervous • 1st Placement	The participants shared mixed emotions about starting placement, '*I was nervous, but not anymore'.* Another learner supported this and said, '*Yes. I was scared of, what if I don't do well? What if I don't do up to their expectations?'.*
Not Stressful • Flexibility	One of the participants said her initial thought when PEEP was discussed with the group was, '*Not stressful'* because, '*the PEEP was more aimed at us, and what we would be doing when we're out on placement'.* In addition to the knowledge and skills, the participants welcomed the opportunity for online learning as it would support them financially. '*It's actually takes the financial burden off of you'.*
Communication • Three Phrase Conversational Model	'The participants shared how the PEEP had supported them to enhance their communication skills, '*Now, my communication is- like, when I'm talking to someone, I want to go deeper into their brains, to find out what's going on.* This participant went on to explain how they use their skills, '*.But now I'm, like, "Really? Can you explain?'.*

Mental Health Nursing Students: Pre-and-Post PEeP

Pre- PEeP (N=24)

Question	Agree		Uncertain		Disagree	
	Freq.	%	Freq.	%	Freq.	%
Knowledge & Skills						
Q6. The PEEP programme will enable me to develop my assessment and documentation	23	95.8	1	4.2	0	0
Confidence in the PEEP Programme						
Q17. I believe the academic staff will deliver the PEEP programme in a way that will support my learning.	23	95.8	1	4.2	0	0
Q20. I believe the involvement of experts-by-experience (patients, service users or carers) in the project will be useful in supporting my learning.	24	100	0	0	0	0

Post-PEeP (N=24)

Question	Agree		Undecided		Disagree	
	Freq.	%	Freq.	%	Freq.	%
Knowledge & Skills						
Q6. The programme enabled me to develop my assessment and	23	95.8	0	0	1	4.2
Confidence in the PEEP Programme						
Q17. The academic staff delivered the programme in a way that supported my learning.	24	100	0	0	0	0
Q20. The involvement of expert-by-experience (patients, services or carers) in the project has been useful in supporting my learning.	23	95.8	0	0	1	4.2

Mental Health Nursing Students: Pre-and-Post PEeP

Pre- PEeP (N=24)

Question	Agree		Uncertain		Disagree	
	Freq.	%	Freq.	%	Freq.	%
Satisfaction with the PEEP programme						
Q29. I am satisfied that the PEEP programme is structured and organised.	20	88.3	4	16.7.2	0	0
Q33. I am satisfied the time assigned for group or individual reflection will enable me to consolidate my Learning for the day.	**18**	**75.0**	**6**	**25.0**	**0**	**0**
Q34. I am satisfied the peer learning groups will enhance my knowledge and skills.	21	87.5	3	12.5	0	0

Post-PEeP (N=24)

Question	Agree		Undecided		Disagree	
	Freq.	%	Freq.	%	Freq.	%
Satisfaction with the PEEP programme						
Q29. I am satisfied that the PEEP programme is structured and organised	23	95.8	0	0	1	4.2
Q33. The time assigned for group or individual reflection enabled me to consolidate my learning for the day.	**24**	**100**	**0**	**0**	**0**	**0**
Q34. The peer learning groups helped with enhancing my knowledge and skills.	24	100	0	0	0	0

Qualitative Results
Mental Health Nursing Students: Post PEeP

❖**Knowledge**
- *"the PEeP programme has helped me to develop my knowledge on mental health issues"*
- *"The peer learning group has really helped with enhancing my knowledge and skill"*

❖**Confidence**
- *"I feel confident in conducting a risk assessment and mental state examination'*
- *'' feel confident that I will provide quality care in clinical practice"*

❖**Skills**
- *" My medication, assessment, communication and relationship building skills have improved"*

❖**Professionalism**
- *"The time assigned for group, individual reflection and discussion with practice assessors positively shaped my attitudes toward patients and clinical practice"*

Academics and Practice Assessors: Post PEeP

Academics

❖ **Knowledge, skill and confidence development**

- I see it as a useful tool for enhancing practice. I don't have any doubt about that. And I see it as a useful tool for developing knowledge, and a useful tool for building on the skills that the student nurses have, and even building new skills

❖ **Partnership working with practice assessors**

- It creates a safe space to learn from one another, from our practice colleagues. We can talk about the challenges we face when supporting students.

Practice Assessors

❖ **Knowledge, skill and confidence development (students)**

❖ **Relieving placement pressures and shaping learning.**

- I think it's a great idea for working in difficult times when placements are scarce. I think it's a much easier way to monitor learning and record learning. You can prescribe exactly what you want people to learn, and measure it.

❖ **Student learning and professionalism**

- It is a very good way of supporting students' learning and professionalism such time keeping.

Expert-by-Experience Post PEeP

- Safe place to make and correct mistakes

- Teach students a range of skills: listening, teamworking

- Practice how to responding to challenging situations

Case Scenarios:

- **Jamie**- First Episode Psychosis- Admitted to inpatient ward

- **Jenny**- Mild learning disability, recently bereaved, changes in behaviour and mental state

- **Sandra**- Complex needs/EUPD- Trauma history/ risk behaviours-
  Admitted to inpatient ward

Positives

Challenges

- Supported Trust placement capacity issues

- Collaboration with Trust/Student experience Team- greater understanding of student skills/knowledge prior to practice placement/alignment with Trust policies and documentation

- New resources and enhanced simulation

- Cross field learning- MH/LD

- Opportunity to observe/reflect on skills and practice through use of new videos created by staff

- Timing enabled consolidation of year 1 learning- Theory to practice

- Opportunity to develop Team working /peer learning

- Increased connections/sense of belonging/MH student identity

- High level staff support

- Fantastic evaluations from staff and students

- Ongoing benefit seen in group during year 2 modules

- Great Fun!

- Time to develop resources and develop right amount of content

- Co- production with those with lived experience/diversity of actors used

- Resource intensive- all members of MH team engaged and supported for 3 weeks

- Availability of practice supervisors to support

Student Evaluation
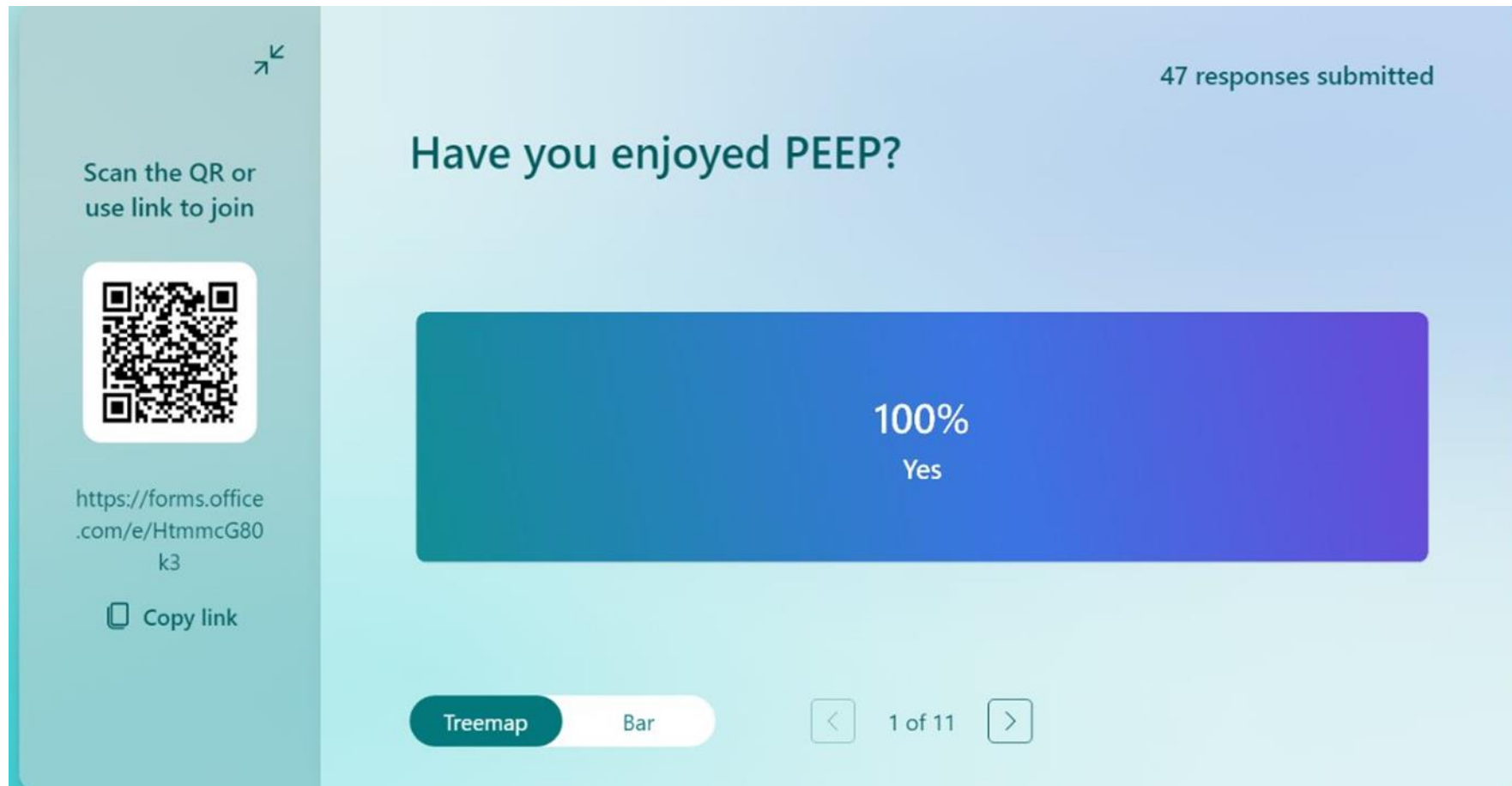
It worked for us because ………….

- Participated in both BNU and UWL PEEP.

- Benefits of systems approach

- Respite for busy clinical learning environments .

- Seamless integration of students into practice

- Students ready for the floor

- Practice development nurses experienced nuances of signing EPAD enabling better support for PS/PA

NHS
West London
NHS Trust

Employer Partner Results

Partnership

Placement Capacity

ePAD and SSSA training
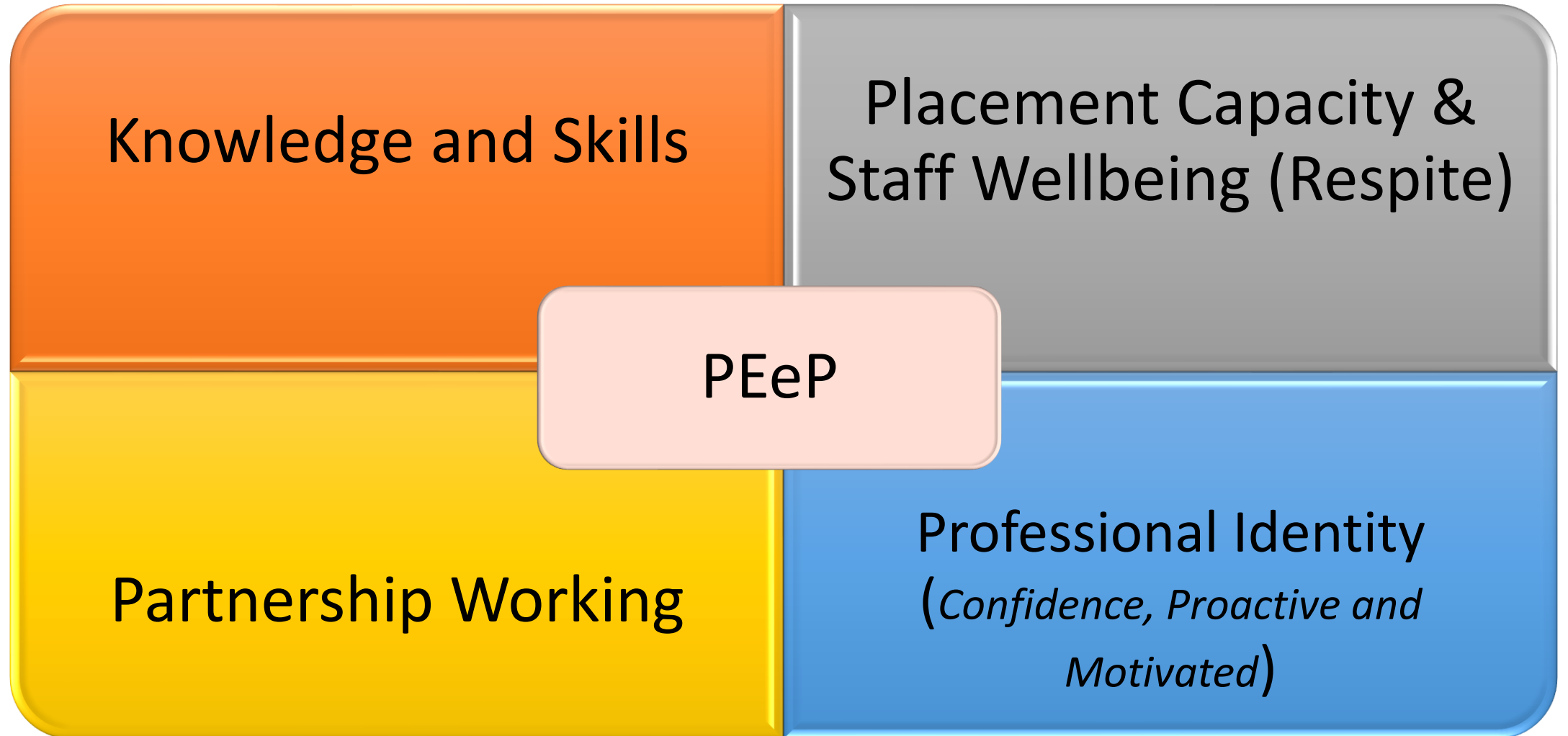
Knowledge of Curriculum

Staff Wellbeing

South West London and St George's
Mental Health NHS Trust

NHS Central and North West London NHS Foundation Trust

NHS West London NHS Trust

Evaluation, Summary

Knowledge and Skills

Placement Capacity & Staff Wellbeing (Respite)

PEeP

Partnership Working

Professional Identity
(*Confidence, Proactive and Motivated*)

PEEP GOOD PRACTICE GUIDE

1.   Academics. It is important that all these parties are involved in the development, delivery PEEP is most effective with involvement from clinicians, experts by experience/actors and evaluation of the PEEP.

2.   Training a pool of practice assessors and supervisors is essential for the assessment of learners.

3.   The programme requires a lead who is supported by a team to deliver the PEEP.

4.   The blend of face to face and online learning was useful for the learners and helped alleviate the pressure on facilitator time.

5.   Peer learning and understanding group dynamics are an essential element of the action learning sets. The groups can either be set ups randomly by the academic lead or groups that are set up by the learners.

6.   PEEP is a virtual placement and it is important to set the expectations and ethos of the placement with the learners so that they are engaged with the learning and programme.

7.   The use of a different scenarios across the life span was recommended as it allowed for supporting the development of skills and knowledge in a range of diagnosis and symptoms.

8.   The programme should be supported by an online learning platform and online resources which can include pre-recorded presentations/interviews to demonstrate skills.

9.   Creativity and innovation are essential in developing a PEEP programme as it has to simulate practice learning in a way that is realistic and engaging for the learners.

10. The programme needs to meet the requirements in terms of clinical hours for learners therefore it is important that the portfolio is concise, measured and accessible for learners.

The Future

Good Practice Guide	Diversifying the PEeP Portfolio	Mental Health PEeP Model

PEeP has been validated by the NMC for the partners as part of their simulated practice hours

Thank you

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