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Speech & Language Sciences
Clinical Handbook 2025-26
BSc (Hons) Speech & Language Therapy
MSc Speech & Language Therapy

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<https://www.leedsbeckett.ac.uk/studenthub/placement-information/health-and-social-care-practice-learning-team/>

Welcome

Welcome to the LBU practice-based learning handbook.

This handbook holds the information required to support students on both the BSc and MSc programmes from Leeds Beckett University. It is aimed at both educators and students.

Thank you to our educators for your support with practice-based learning for both our BSc and MSc students.

Please refer to RCSLT Guidance on practice-based learning and telehealth placements:

- [Practice-based learning guidance](#)
- [Telehealth placements](#)

Sections of this handbook

The handbook is divided into the following sections:

Part A: Placement philosophy and management

Part B: Information for practice educators

Part C: Information for Students

Part D: Appendices

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PART A - PLACEMENT PHILOSOPHY & MANAGEMENT

Speech and Language Therapy Practice Education

Speech and language therapy practice-based learning at Leeds Beckett University is designed to provide learners with high quality opportunities that will enable them to acquire, develop and refine their clinical and professional skills over the course of their pre-registration education. Integrated learning from the academic curriculum alongside practice placement experience ensures that newly qualified therapists (NQPs) meet the HCPC Standards of Proficiency ([HCPC SOPS 2023](#)) and equips them with the skills needed for contemporary speech and language therapy practice ([RCSLT Curriculum Guidance 2021](#)). The overarching management of placement provision and placement education ensures that the programme meets the HCPC Standards of Education and Training ([HCPC SETs 2017](#)).

Partnerships with our practice education providers

Collaboration between practice placement co-ordinators, practice educators, learners, service users and carers, academic staff, and the placements team is central to our placement philosophy. Leeds Beckett hosts the **Speech and Language Therapy Placement Steering Group**, chaired by the Director of Practice Learning and attended by clinical academic staff, practice placement coordinators, practice learning facilitators (PLFs), and members of the Health and Social Care Practice Learning Team. It provides a forum for consultation and discussion on a wide range of practice matters including, any local issues that may impact placement capacity, and elements such as supporting students with disabilities in practice settings.

In addition, the Head of Subject attends the **Yorkshire Speech and Language Therapy Managers Group** which meets 3 times a year and comprises speech and language therapy service leads and representatives from Higher Education Institutes (HEIs) from across the Yorkshire and Humber sub-region of NHS England (North). The group facilitates sharing good practice in relation to service delivery and is an opportunity for HEIs to ensure they have a good understanding of current issues in practice as well as to consult the group on education matters.

As well as the more formal meetings, members of the university teaching team are **link lecturers** for geographical areas within Yorkshire and the Humber, acting as first point of contact for general queries and advice and arranging bespoke updates when requested by placement settings.

All students are allocated an Academic Advisor (lecturer) who will meet with students prior to their placements. They will discuss key clinical skill development, any support that the student may need, as well as any necessary reasonable adjustments required for their placement. This information will be shared with practice educators ahead of the placement and can be discussed further with the academic advisor at any time.

Academic advisors will contact the practice educator at around the mid-point of each placement to check in with educators and support them with any queries or concerns. If required, the academic advisor may request to meet with the practice educator and student to facilitate a 3-way conversation and agree on an action plan. The meeting could take place online, at university, or involve a visit to the placement setting. Practice educators are encouraged to contact the university at the first opportunity with concerns or queries related to specific students or general placement issues.

We value the opportunity to bring a broader perspective to our placement strategy by engaging in professional networks to inform placement practice and developments. Nationally, there is a university practice placement leads meeting, which provides an opportunity for Higher Education Institutions (HEIs) to meet online to consider issues for placement provision such as capacity and 'placement footprint'. In this group, we also identify and share good practice in matters such as student assessment, progression in the placement setting and students' contribution to the workforce. LBU practice placement leads are also actively engaged in the RCSLT work on practice education to improve support for practice educators, HEIs and students, and are also committee members of the RCSLT Practice Educator Clinical Excellence Network and the National Association of Educators in Practice.

The Head of Subject or the Course Directors attend twice-yearly meetings at RCSLT CREST (Committee of Representatives of Education in Speech & Language Therapy) which considers pre-registration speech and language therapy education in a broader context. The Director of Practice Learning also attends the Regional AHP forum to network locally and help to determine strategic and collaborative direction.

Roles and Responsibilities in Practice Education

Placements Team

A wide variety of people work together to ensure that placements are successful from the perspective of both students and practice educators.

HEI team	Role
University practice placement Lead	The practice placement lead has a regional overview of practice learning including capacity management, quality monitoring, analysis of training needs, and development of new resources. The practice placement lead has an advisory role within the clinical academic team and works closely with the Practice Learning Team (PLT) at the university, in the strategic and operational management of placements. They also take a lead in sourcing new placement opportunities and developments to enhance placement quality, and link with regional and national groups for practice learning.
Link Lecturer	The link lecturer is responsible for supporting practice placement co-ordinators and practice educators in specific regions of Yorkshire and Humber. They are a source of advice and help with general queries, supporting quality monitoring within the trust, providing bespoke updates and attending staff meetings to facilitate discussion on student placement matters.
Academic advisor	All students are allocated an academic advisor, who takes a clinical tutor role, to support the student's practice learning through working with them in small groups or individually. The academic advisor acts as a point of liaison between the student and practice educator whilst the student is on placement.
Practice Learning Administrator	The SLT Practice Learning Administrator works within the Practice Learning Team. The practice learning administrator supports the allocation process and fields queries and enquiries from practice educators regarding their allocations, placement documentation and timelines. The administrator also coordinates practice educator training courses.
Disability Advisor	As part of their wider role, the disability advisor works closely with the university course team to ensure that students who require reasonable adjustments can be allocated suitable placements and receive the support required to complete them successfully. They offer advice on how reasonable adjustments can be facilitated in the practice setting in line with the Equality Act 2010 and contribute to practice educator training.
Placement Setting	Role
Service manager (role re practice education)	The service lead oversees the service policy re placements, and supports staff to attend practice educator training, to provide placements; they should ensure that practice education is on every SLTs job description and is discussed at PDR.
Practice Placement Coordinator	This role is taken by a speech and language therapist who leads on practice-based learning within the service. The co-ordinator has an overview of placement capacity and quality, supports practice educators and liaises with the HEI on aspects of practice learning such as training needs. They collate the allocation of placements within the setting and provide the relevant educator details to the university.
Practice Educator	Practice educators have responsibility for student learning and assessment in the practice setting.
Practice Learning Facilitator (PLF)	PLFs are based in practice areas with responsibility for ensuring that quality and capacity of placement opportunities are maintained across all health professions in the Trust/ service/ area.
Students / learners	Students / learners need to manage their learning and professional relationships, alerting the practice educator and HEI to any problems that might prevent progress or satisfactory completion of the placement. Students should understand that the priority for a clinician is the service user.

Health and Social Care Practice Learning Team

The Practice Learning Team co-ordinates all placement activity across health and social care courses in the Leeds School of Humanities and Social Sciences, School of Health & Community Studies and School of Clinical and Applied Sciences. Under the academic leadership of the Director of Practice Learning, the team is

responsible for developing and managing policies and systems for all aspects of placement learning, including:

- Having an overview of quality assurance and monitoring through the Practice Assessment Record and Evaluation (PARE) www.onlinepare.net
- commissioning Occupational Health (OH) services and providing a system of DBS checks
- managing pre-course occupational health and DBS checks
- managing OH referrals and maintaining fitness to practice information
- commissioning and managing e-learning mandatory training and maintaining records of student completion
- providing insurance and organising honorary contracts for students and placement settings not included in the Learning Development Agreement (LDA)
- providing guidelines and supporting set-up of Private, Independent and Non-NHS Organisations (PIVO) placements
- organising and administering tariffs for practice education
- commissioning and distributing student NHS Smartcards and uniforms
- hosting and updating the practice learning website
- co-ordinating practice education courses and maintaining records of attendance
- supporting the student placement allocation process
- providing a point of contact for practice educators and students

Allocating Placements

Placements are allocated primarily on the basis of students' needs in terms of clinical experience. In addition, reasonable adjustment plans, known health and learning needs, as well as mitigating and personal circumstances are considered.

All placement allocations are shared with local NHS placement partners through an allocation system. This involves all NHS clinicians from bands 5-8, on the basis of every wte SLT providing 22 placement days in a year. This figure was calculated for 2025-26 drawing together workforce data with student numbers, and may change in future years.

Placement allocation is managed through an electronic database, InPlace. This system enables student placement pathways to be modelled, ensuring that each 'learner journey' contains a variety of experiences and meets the core requirements for a balance of adult and paediatric placement sessions, and Eating, Drinking and Swallowing (EDS) opportunities, as identified by the RCSLT. This has been achieved through identifying a range of labels for placement settings which are identified through the allocation and tagged within the InPlace software.

Where possible we aim to advise students and placement settings of placement allocations a minimum of 4 weeks prior to the start date of placement. If a placement does not go ahead due to operational reasons such as withdrawal of placement or student health needs, we will contact the relevant parties as soon as possible, to seek alternative arrangements. If a setting cannot provide a placement for any reason, they should provide an alternative opportunity.

Placement Structure and Support

Practice educators

The RCSLT calls on all practising SLTs to share the responsibility for supporting the future workforce, and to provide a minimum of 25 days of practice-based learning per year per whole time equivalent (pro rata). As discussed above, we are allocating placements on the basis of every NHS SLT (band 5-8) in the region providing 22 placement days across the academic year.

Training for practice educators

The HCPC [SETs](#) state that 'Practice Educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme'. The university delivers

onsite and online practice educator training, and hosts a distance learning educator training programme. The university offers two educator programmes:

- new educator training, suitable for educators new to clinical teaching,
- and refresher training for experienced educators.

RCSLT recommend that all educators should have refresher training every 3 years.

The educator programmes cover:

- Student learning approaches
- How to prepare for having a student
- Giving feedback
- Grading students
- Evidence-based practice
- Equity, Diversity and Belonging

Link lecturers can arrange bespoke updates for a team, for example as part of a staff meeting. We also welcome educators to engage with CPD activities at the university, this includes attend seminars, lectures and workshops, being involved in the admissions process, or engaging in student assessment with the tutor team at the university. Please contact sltplacements@leedsbeckett.ac.uk for more information.

Since the inception of the MSc SLT programme at York St John University (YSJ), educator training will be delivered in collaboration with both the LBU and YSJ teams. Educators can attend training at either university and this will support them to work with SLT learners from both universities.

Practice Educator Handbook

Section B of this handbook provides comprehensive information about:

- Roles and responsibilities
- Placement allocation processes
- Working with students on placement
- Grading
- Feedback following placement
- Sources of information and support
- Full details of how to contact the university

Tailoring placements to individual students

University clinical placement leads allocate students to placement settings with knowledge of the student and the setting, with the aim of supporting the student to succeed on the placement.

Practice educators need to consider how to tailor the placement to the student, so that the student is welcome, valued and feels included. This may involve consideration of health, medical needs, learning differences, religious, faith or cultural differences, gender differences, caring needs or financial commitments.

We work closely with university student disability services and well-being services to help support students with support needs. Students meet with their academic advisors prior to the placement starting and discuss their learning and progress from previous placements, and any elements that they want their educator to know about in order to plan the next placement. They complete a pre-placement planning form on PARE and will share this with their educator prior to the placement starting.

There are times when we do not know about a student's needs and they may arise during the placement. If you are concerned about a student, please inform us immediately and we can work with you and the student to assess what adjustments and support are needed to enable them to participate successfully in their placement. Educators need to adhere to the RCSLT guidance for supporting student SLTs with disabilities on placement <https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/supporting-slts-with-disabilities-in-the-workplace/>

All educators need to be culturally aware and culturally competent, including on issues relating to students from the global majority for example, Black, Asian and Minority Ethnic (BAME) students and students who identify as LGBTQIA+. University tutors share and use preferred pronouns and encourage educators to do the same. Please see RCSLT's diversity and anti-racism web pages <https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/diversity-anti-racism>

Educators, co-ordinators and service managers should work with HEIs to support students who raise issues about any form of discrimination including racism, unconscious bias, microaggression and bullying during their placements.

Supportive curriculum design

The speech and language therapy pre-registration curriculum is designed to be practice – oriented and to ensure that students at university are well prepared to meet the HCPC Standards of Proficiency. Please see Appendix 2 for details of the curriculum for BSc and MSc students.

Timing and structure of placements

Students are provided with a variety of placement experiences across settings and service user groups, and may also undertake practice-based learning activities such as simulation, case discussion, training and project work, as appropriate.

The minimum requirement for placements is advised by the RCSLT practice-based learning guidance (2025) as 75 days (562.5 hours) with 50 days of clinically based practice-based learning, of which at least 15 days must be with paediatric clients and 15 with adult clients, and with the remainder organised to reflect local service delivery needs (RCSLT, 2025). A further 25 non-clinically based days (187.5 hours) days brings the minimum practice placement hours to a total of 562.5 hours. At Leeds Beckett we schedule more than the minimum requirement of practice placement hours.

Both BSc (Hons) and MSc pre-registration courses provide a combination of ongoing (one day a week over a series of weeks) and block (four days a week for a series of weeks) placements. Ongoing placements allow students to integrate their incremental learning from university over the course of the placement, and gain support through university seminar groups. Block placements provide an immersive experience where students become part of the placement setting team.

Placements need to provide students with the opportunity to gain skills in working with clients with communication, and eating, drinking and swallowing differences.

University clinical teaching and support

Capstone modules

A clinical 'capstone' module at each level of the BSc and MSc gives students the opportunity to integrate their learning from other modules and apply it. Capstone modules are primarily taught through scenario-based learning in small groups, enabling students to explore the application of theory to practice and to develop key clinical and professional skills that will support their placement learning. Students are prepared for practice learning by discussing scenarios, making decisions about assessment and management, informed by theory drawn from learning across the curriculum. Students also learn key clinical skills such as making referrals, writing reports and completing case note entries.

PARE (Practice Assessment Record & Evaluation)

Recording of practice-based learning is supported through a platform called PARE (Practice Assessment Record and Evaluation). This is a student-centred method of fostering and documenting learning, enabling learners to recognise, record, reflect upon, and plan their own development, integrating knowledge, skills and experiences from placement. This prepares students for placement and life-long learning in practice by encouraging them to take responsibility for their own development through understanding what they can currently do and what they still need to learn and develop. From September 2025, all practice placement

documentation for the LBU SLT programme will be housed within PARE. Practice educators and students will all have logins for PARE which will facilitate sign off and feedback within the duration of the placement and will support efficiency of placement admin and records.

Interprofessional Learning (IPL)

The university has a well-established IPL programme running through all AHP courses. IPL is embedded into the clinical and professional skills modules at each level of both the BSc and MSc programmes and includes working with a range of healthcare students from physiotherapy, OT, dietetics, social work and adult and mental health nursing alongside tutors from those professions. These learning experiences help to prepare students for multi-professional practice settings.

Simulated Learning

Students on both BSc and MSc courses take part in simulated learning, working with actors who play the part of clients or carers. Scenarios are based around real-life situations and provide the opportunity for students to practice interpersonal communication skills, including solution focused and health coaching approaches, in a safe environment.

Other support

All students are allocated an academic advisor whose role is to support students' academic development and identify and signpost them to help as needed, such as specialist learning support, money advice or wellbeing services. Students who have identified learning needs or who require other reasonable adjustments are encouraged to share this information with their practice educator via the Student Placement Planning form on PARE and this process is supported by the student's academic advisor. The academic advisor acts as a point of liaison between the student and practice educator whilst the student is on placement.

Prior to starting placement, students receive a thorough clinical placement briefing. Students are advised both in the clinical briefing and in pre-placement planning meetings that if they experience any difficulties whilst on placement, they should contact their academic advisor as soon as they have a concern. The academic advisor will discuss the concerns with the student and make a plan with the student, as required. This may include clinical tutorials within university and/ or contacting or visiting the student in the placement setting. The tutor may discuss areas of concern or personal / health issues that the student agrees to share, and work with the student and practice educator to identify and agree on points for action, indicating the timescale, and support required.

Learning Resources

Students are members of the university library which gives access to books, journals, ebooks, databases, video resources, and computer software to support academic work. The library provides digital resources where possible. Students also have access to the university 'Speech and Language Therapy Resources Room' which contains SLT specific books, clinical assessments, resources and other clinical tools. These can be used to support learning and preparation for placement but cannot be removed from the university. We continue to support students through the onsite SLT clinic working with adult clients; this clinic hosts a vast range of resources to support work with adult clients.

Placement preparation and Assessment

Fitness to Practice and Mandatory Training

Students undertake mandatory training through the online platform supported by NHS England called e-learning for healthcare (e-lfh). This programme has been adopted for all Health and Social Care students to deliver required mandatory training modules listed below:

- Data security including information governance
- Equality and diversity
- Health and safety
- Conflict resolution
- Infection prevention

- Manual handling
- Fire safety
- Safeguarding adults
- Safeguarding children
- Preventing radicalisation
- Resuscitation for adults
- Resuscitation for children
- The Oliver McGowan Mandatory Training on Learning Disability and Autism

Students maintain their 'Fitness to Practice' record, which must be completed prior to placement on PARE. In addition to mandatory training, DBS and occupational health status is also recorded, along with confirmation that students have read and understood the HCPC Standards of Proficiency, HCPC Guidance on Conduct and Ethics for students and HCPC Confidentiality – guidance for registrants. The [LBU Fitness to practise policy procedure](#) applies to all students on the speech and language therapy courses.

Core Skills

Students on placement work towards the Core Skills (all hosted on PARE) which have their foundations in the HCPC Standards of Proficiency 2023 ([SOPs](#)) and require students to demonstrate a range of competencies across 4 key domains:

- Professional conduct
- Communication skills and working in partnership
- Clinical skills
- Application of theory to practice

Core skills map directly onto placement learning outcomes; supporting students and practice educators to have a clear understanding of progress towards meeting the learning outcomes. The core skills are incremental across the stages of the SLT programmes. They clearly document the requirements for progression over the course of each placement experience, enabling practice educators to apply assessment criteria consistently. The core skills document provides a clear definition of when a core skill should be assessed as 'not demonstrated', 'emerging' or 'appropriate' for the level of training. The core skills provide:

- Differentiated expectations at year 1, year 2 and year 3 (BSc) and year 1 and year 2 (MSc)
- Guidance as to what is expected at the mid and end points of each placement
- Advice on when to contact the university regarding concern over a student's progress with the core skills
- Information on when to award a PASS or FAIL grade on the placement

Please note that all students must pass their placements, to enable them to meet the appropriate level for their clinical learning to proceed. Where there is 'no opportunity' to demonstrate a core skill on placement the university will work with the placement setting to identify an opportunity for the student to work towards that skill.

Quality Monitoring of practice placements

Practice Assessment Record & Evaluation (PARE)

The quality of practice placement education is crucial to shaping the therapists and the profession of the future. It is vital that training is quality assured as being of the highest possible standard.

In line with NHS England (NHSE) guidance, we use the Practice Assessment Record and Evaluation held on <https://onlinepare.net>. Educators will receive activation and login details of this from their Trusts/management teams. PARE provides details of each placement experience and this can be accessed by students before they start their placement.

PARE hosts the following functions:

- All practice placement documentation for each placement across the duration of the course
- A student evaluation questionnaire

- A practice placement profile
- The regional educational audit tool
- A practice educator register

Embedded in PARE, the audit tool enables HEI tutors to audit the placement experience on a 2-yearly basis. The audit tool is based on the principles of:

- Partnership working
- Multi-professional approach
- Minimising burden
- Shared responsibility for audit
- Action planning and ongoing review
- Quality enhancement

Auditing takes place in a joint meeting between the Practice Placement Co-ordinator, University Link Lecturer and Practice Learning Facilitator (where relevant) and considers the domains of equity and diversity; teaching learning and assessment; learning environment and resources and quality. Whilst this joint approach to the formal audit process provides an additional opportunity for informal discussions on wider student placement matters, all Practice Placement Co-ordinators and Educators are asked to contact the university at any time if they have queries or concerns.

The PARE audit houses the student evaluation questionnaire which is conducted by each student following their placement. It is a requirement of the university that all students complete this following placement and, as part of the audit process, questionnaires are reviewed jointly to identify themes of good practice and any areas for development. There is a practice educator evaluation tool that allows our practice partners to evaluate their own experience of the practice placement. Feedback from students and from practice educators forms the basis for ongoing development and is monitored by the HEI placement co-ordinator.

NHS Education Contract

NHS England have developed a national NHS Education contract which covers all healthcare students in any placement across the UK. NHSE monitors both capacity and quality issues across all healthcare education within Trusts and this information is triangulated with the HEI report. Monitoring themes include student recruitment, learning within the university, learning within the practice setting and student completion and commitment. Performance across these themes, along with an analysis of PARE data is reported by the Director of Practice Learning at an Annual Contract Review meeting, which includes meeting with students across the professions. If required, action plans are developed.

Arrangements for Private, Independent and Voluntary Organisations (PIVO)

A separate learning agreement currently regulates the relationship between the university and the Private, Independent, Voluntary and Non-NHS Organisations (PIVO) relating to the provision of placements for students in these settings, including long arm placements. As with all other placements, PIVOs set up a PARE profile and quality is monitored via the PARE audit. In addition to the standard student feedback following placement, as part of the evaluation, students on long-arm placements are requested to complete additional evaluations of their placement experiences so that the university can monitor quality and appropriateness of the placement in terms of both student learning and support within the setting.

Approval of Placements

The university placement co-ordinator takes responsibility for approval of new placements. All new placement settings develop a PARE profile so that students are able to evaluate the experience enabling support and development needs to be identified. The practice placement profile informs the student of the logistics of the experience and the learning experiences that the placement will provide. A pre-audit occurs to ensure that the placement meets the NHSE standards and to determine the capacity, and then allocations can take place. Health and safety and risk assessments are completed to make sure the placement is suitable and that any extraordinary risks are identified. Once a student has completed a placement then an audit of the experience will occur and evaluation of the support and learning is conducted. The university team

evaluate the placement at the end of the first student placement, taking on board feedback from the practice educator and the student. If the placement has been successful future allocations will be sustained.

Placement Capacity

The availability of practice placements is determined by the number of approved placement providers that can supply them. Trusts across the Yorkshire and Humber region are involved in student placements and additional capacity is delivered through PIVO, role-emerging and pilot innovative placements. Placement capacity is identified by the HEI based on student numbers and required sessions (22 days per SLT wte per year). Data on FTE practice educators is supplied to the Practice Learning Team by placement providers or from NHS e-roster. Placements are allocated in an equitable way, on the basis of 22 days per wte SLT in NHS settings for the academic year 2025-26.

Role Emerging Placements

All speech and language therapy students experience practice placements in 'traditional' practice settings, where there is an established role for speech and language therapists and so they work alongside a qualified therapist. Role emerging / long arm placements occur in sites that do not have an established speech and language therapy role. These settings offer the student an opportunity to consider the needs of the setting and the potential speech and language therapy role, and to develop projects that may be relevant for the setting and client group.

Research suggests that students are more independent and autonomous following experience in a role emerging placement, resulting in increased professional growth. Students have the opportunity to experience different and expanded roles within the profession. Speech and language students also report feeling valued by the experience of role-emerging placements as they offered opportunities to promote the profession and develop their professional identity.

Role emerging / long arm placements are set up following the same procedure and criteria as NHS placements and are quality assured in the same way. In terms of staffing, there is an onsite and an offsite practice educator. The 'mentor' is the member of staff (not an SLT) who is the on-site practice educator in the setting and the 'supervisor' is a speech and language therapist who provides long arm supervision. All practice educators receive appropriate training, placement handbooks and any additional relevant supporting documentation. Please talk to the LBU team if you have an idea for a role-emerging placement.

LBU SLT Clinic

The onsite SLT Clinic is run by a university lecturer, throughout the placement timetable, and provides a range of clinical placement opportunities for students to work with adults who have acquired communication difficulties. The clinic has provided an increase in placement capacity, as well as providing SLT intervention to people both in person and via online telehealth, who would not otherwise access SLT on an ongoing basis.

Developing new placement opportunities

We have been involved in some exciting practice placement opportunities in the form of leadership and research placements, increased student: educator ratio placements, and a range of project style placements. These placements have been innovative, impressive, and have hugely supported placement expansion in our region. They have increased our flexibility to provide different placement experiences which still enable students to achieve practice-based learning competencies. We are committed to continuing this work and developing further innovative placements.

PART B - INFORMATION FOR PRACTICE EDUCATORS

Placements in 2025-26

We are delighted to be welcoming 5 cohorts of students to university this year comprising of BSC years 1, 2 & 3 and MSc years 1 & 2. We will continue to allocate students to both onsite and remote (telehealth) clinical activity and are keen to support educators to provide placements in whichever format supports their clinical roles. Please see our placement calendar for 2025-26 (Appendix 3). Practice educators can be allocated to observation (1 day), ongoing (1 day per week for several weeks) or block (4 days per week for several weeks) placements.

Types of placement

The RCSLT practice-based learning guidance (2025) indicates the range of placement types, formats and models of supervision that are acceptable for practice placements.

At LBU our placement types are:

- Observation days
- Ongoing placements (one day per week whilst attending university teaching on other days in the week)
- Block placements (four days per week for several weeks)

Placement formats include:

- In person
- Remote / via telehealth
- Shared placements eg in more than on service
- Client pathway placements eg. Acute then community teams
- Interprofessional placements with other AHP students

Supervision models include:

- Face to face
- Remote / online
- Indirect (practice educator is not present in the setting but supports learners via regular brief / debrief)
- Role -emerging (practice educator does not work in the setting, placement provides evidence for a business case to develop the SLT role in that setting)
- Peer mentoring (final year learners support first year learners)

This guidance supports all educators to provide placements in different ways to support student learning on placement and to enable them to be an asset to teams and to support service delivery to clients.

Components of practice placements

RCSLT practice based learning guidance (2025) states that all SLT learners need to access a minimum of 562.5 hours (75 days) of practice based learning. This can be divided up as a combination of sessions as below:

- a) 375 Hours (50 days) of **clinically based practice-based learning opportunities** with competencies supported and assessed by a registered SLT, in a formal placement period. This can include any elements that are part of an SLT's role, for example:
 - Working with clients
 - All admin, planning, liaison and MDT work related to clients
 - Training (delivering and receiving)
 - Universal, public health and preventative work
 - Research
 - Leadership
 - Project work
 - Any simulation opportunities that support practice-based learning
 - Indirectly supervised or role emerging practice-based learning

The balance of these components can be agreed between the practice educator and the HEI, and should be driven by learner competence development.

The 375 hours (50 days) are further broken down into a minimum of:

112.5 hours (15 days) relating to adults

112.5 hours (15 days) relating to children

with the remaining 150 hours (20 days) reflecting local service delivery needs.

- b) 187.5 hours (25 days) of **non-clinically based practice-based learning opportunities** with competencies supported and assessed by registered SLT and / or by other professionals.

This includes:

- Placement sessions where an SLT is not present e.g. nursery / school / care homes; staff in the setting will support the learners in a formal placement period

And also includes HEI-based sessions which may not be in a formal placement period, involving:

- Formal simulation learning opportunities
- Placement briefings/preparation/ reflection / debrief
- Clinical scenario-based teaching / workshops
- Opportunities to meet experts with lived experience
- Practical role play workshops
- Practical interprofessional learning workshops

The focus of these sessions should be driven by learner competence development.

Eating, drinking and swallowing (EDS) competencies are a mandatory element of student practice based learning. Students need to evidence a range of competencies in EDS and achieve a recommended 60 hours of EDS practice-based experience. This is composed of a minimum of 30 hours from clinical practice with adults and 10 hours from clinical practice with children.

Students can engage in any activity that is part of their practice educator's daily role, and these can count towards meeting their practice based learning competencies. Educators may choose to develop practice-based learning activities that are specifically designed to support student learning, irrespective of caseloads and client engagement. These might include:

- Case studies with/without video. These enable students to follow the service user journey from referral to discharge, engage in case history and information gathering discussions, complete assessments, plan and discuss interventions, thus developing clinical decision-making skills.
- Clinical and professional scenarios. Clinical scenarios could involve referral decisions, discharge decisions or breaking bad news. Professional scenarios could involve caseload prioritisation, MDT working or legal and ethical issues.
- Role play. This could involve students practicing and developing clinical skills with educators/peers.
- Sessions with experts with lived experience. These will involve real service users and carers who volunteer their time to support student learning; e.g. provide repeat case history opportunities, repeat assessment experiences, repeat intervention practice, and are an additional source of feedback.
- Project work. This might include health promotion, making resources, life stories, developing training packages, carrying out audits.
- Attending CPD activities, for example: workshops, webinars, enabling theory to practice development. These practice-based learning activities enable a flexible approach to practice placement delivery.

PARE

PARE (Practice Assessment Record & Evaluation) has been launched for 2025-26 for all practice placement documentation. Individual student placement records are now housed in PARE and can be accessed by the

student, their practice educator, and their academic advisor. All necessary documentation is visible, including pre-placement planning, reasonable adjustment requirements, placement attendance, placement reflections, placement tasks such as the session plans, single session evaluation, core skills, and eating, drinking, and swallowing competencies and hours. The student, practice educator, and academic advisor will record and sign all placement documents electronically in PARE.

All practice educators need to contact their practice placement coordinator for a PARE login or contact sltplacements@leedsbeckett.ac.uk if they require help accessing the system. PARE training is available to all practice educators and a recorded training session is available here

[PARE practice educator training Sept 2025](#)

We adhere to the RCSLT placement and telehealth guidance which supports all educators to provide placements in different ways to support student learning and to enable students to be an asset to teams and to support service delivery

- [Practice based learning guidance 2025](#)
- [Telehealth placements](#)

Telehealth / remote placements

Telehealth placements should follow RCSLT [Telehealth placements](#) guidance. Students and educators should follow the LBU general guidance re expectations of placements. Please agree a supervision plan with the student re how you will meet, plan, debrief and provide feedback in an online format.

Students' IT equipment

Trusts / services will need to provide students with Trust laptops, unless they permit students to use their own devices for the duration of the practice placement. Students can collect Trust equipment from Trust premises, where available, prior to the start of the placement.

If students are using their own IT equipment, they must take all reasonable steps to ensure this is safe. Where IT equipment is required for placements and if the student does not have their own, the university can seek to support this for the duration of a telehealth placement.

RCSLT guidance states that where students are providing telehealth services using their personal devices and / or from their homes, the placement provider should ensure that professional and local governance is applied. Please see RCSLT telehealth placement guidance [Telehealth placements](#).

Students should use their university email accounts to contact educators or service users. Students may use their own mobile phones professionally, if they are comfortable with this, and it is appropriate to do so. Students should not disclose their personal numbers to service users; they should alter the privacy settings on their phones or include '141' before dialling.

Confidentiality and professional responsibility

Students are aware that they must be careful to maintain confidentiality on all practice placements. They should follow the policy and procedures for telehealth that are specific to the practice education setting. Appendix 1 sets out the Confidentiality guidance to which students should adhere on placement and in university assessments. They should also adhere to HCPC Confidentiality guidance. [HCPC guidance on confidentiality](#)

Students should engage in telehealth placements in a private location without interruption. If this is not possible from the student's home or accommodation, then university premises can be organised.

Students need to confirm on PARE, prior to attending placement, that they have access to and will use a private, uninterrupted place for telehealth placements.

Students on telehealth placements are directed to:

- Dress professionally, wearing their uniforms as required
- Carry out calls in a private, quiet, uninterrupted space, sitting at a table or a desk, that is free from distractions of people and pets
- Wear headphones to ensure that they cannot be overheard by others in their households to protect the confidentiality of the client and to reduce ambient noise
- Close windows where there may be a privacy issue

- Use a digital background that is professionally appropriate, free from distraction and inoffensive. Some platforms support virtual background use.
- Ensure they have adequate lighting so that the client can see them clearly.

Telehealth platforms

Students should use the platform that the service / Trust is using for telehealth / remote working. Students can access and set up MSTeams meetings from their university accounts, if required. They are familiar with MS Teams from university meetings. Leeds Beckett University does not support Zoom due to security concerns. Whatsapp and Facetime are not approved platforms for students to use to discuss clients.

Telehealth sessions

Please give the student guidance on what to do if the technology fails during the session, or if the client has a health or other emergency. Please discuss the etiquette of the session with the student i.e. if they are observing do you want them to be muted? Students are not permitted to record telehealth sessions unless this has been pre-arranged and explicitly consented to by all parties, i.e. for the purpose of assessment. Where university tutors are requested to attend telehealth sessions to support student learning, consent must be gained for this from the client.

Writing up case notes for telehealth sessions

Students should follow organisational processes for note writing. If the student cannot access the electronic notes system e.g. SystmOne, they can write anonymised notes / reports as word documents and email to educators. Students should follow usual confidentiality guidelines on written and verbally reported information.

Tailoring placements to individual students

University placement leads allocate students to placement settings with knowledge of the student and the setting, with the aim of supporting the student to succeed on the placement. Practice educators need to consider how to tailor the placement to the student, so that they are welcome, valued and feel included. This may involve consideration of health, medical learning differences, religious, faith or cultural differences, gender differences, caring needs or financial commitments.

We work closely with university student disability services and well-being services to help support students with additional needs. Students meet with their academic advisors prior to the placement starting and discuss their learning and progress from previous placements, and any elements that they want their educator to know about in order to plan the next placement. They complete a pre-placement planning form on PARE and will share this with their educator prior to the placement starting.

There are times when we do not know about a student's needs and they may arise during the placement. If you are concerned about a student, please inform us immediately and we can work with you and the student to assess what adjustments and support are needed to enable them to participate successfully in their placement. Educators need to adhere to the RCSLT guidance for supporting student SLTs with disabilities on placement <https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/supporting-slts-with-disabilities-in-the-workplace/>

All educators need to be culturally aware and culturally competent, including on issues relating to students from the global majority for example, Black, Asian and Minority Ethnic (BAME) students and students who identify as LGBTQIA+. University tutors share and use preferred pronouns and encourage you to do the same. Please see RCSLT's diversity and anti-racism web pages <https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/diversity-anti-racism>

Educators, co-ordinators and service managers should work with HEIs to support students who raise issues about any form of discrimination including racism, unconscious bias, microaggression and bullying during their placements.

Contacts

SLT Practice Placement Leads

Naomi de Graff n.de-graff@leedsbeckett.ac.uk 0113 8123257
Jo Sandiford j.c.sandiford@leedsbeckett.ac.uk 0113 8128620

Link Lecturers

Link Lecturers are available for general enquiries and discussions, including advice, arrangements for audit or requests for training.

Link lecturers 2025-26		
Airedale	Lindsey Thiel	0113 812 6574 l.thiel@leedsbeckett.ac.uk
Bradford: BDCT BDCFT Listening for Life	Victoria Wadsworth Jo Sandiford	0113 812 4473 v.l.wadsworth@leedsbeckett.ac.uk 0113 812 8620 J.C.Sandiford@leedsbeckett.ac.uk
Hull & Humber Area	Sarah James	0113 812 5823 s.james@leedsbeckett.ac.uk
Lincs NE Lincs	Victoria Wadsworth	0113 812 4473 v.l.wadsworth@leedsbeckett.ac.uk
York Scarborough TEWV	Ben Bolton-Grant	0113 812 6241 b.bolton-grant@leedsbeckett.ac.uk
Northallerton Harrogate	Lorette Porter	0113 812 3269 j.l.porter@leedsbeckett.ac.uk
Leeds adult: LTHT, LCH, LYPFT teams	Naomi de Graff	0113 812 3257 n.de-graff@leedsbeckett.ac.uk
Leeds paed LCH & LTHT teams	Sarah White	0113 812 6240 sarah.white@leedsbeckett.ac.uk
PIVO placements	Jo Sandiford	0113 812 8620 J.C.Sandiford@leedsbeckett.ac.uk

Academic Advisors

Each student has a named academic advisor. This will be listed on their PARE record. If you would like to talk to someone about any issues or concerns that you have about the student, please contact the academic advisor in the first instance.

Health and Social Care Practice Learning Team (PLT) – Administration & enquiries

Elle Trueman is our Practice Learning Team Administrative Officer. Elle is responsible for all administrative work relating to placement allocation, PARE logins, and other placement related administration. Please contact Elle on: sltplacements@leedsbeckett.ac.uk or tel 0113 8124525.

Being a practice educator

Becoming a practice educator

The RCSLT advise that clinicians should gain their NQP competencies after qualification prior to becoming a practice educator. They can be involved in practice placements as an NQP but should not have the role as the lead educator or be solely responsible for student practice placement assessment until they have their NQP goals signed off.

Training for practice educators

The HCPC [SETs](#) state that 'Practice Educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme'. The university delivers onsite, online and a distance learning educator training programme. The university offers two educator programmes; new educator training, suitable for educator's new to clinical teaching, and refresher training for experienced educators. RCSLT recommend that all educators should have refresher training every 3 years. The programmes cover an introduction to key skills in practice education such as giving feedback and working with students with different learning approaches, and use scenarios and group discussions to facilitate educators in understanding how best to support students on placement.

Practice educator training covers:

- Student learning approaches
- How to prepare for having a student
- Giving feedback
- Grading students
- Evidence-based practice
- Equality, diversity and belonging

Link lecturers can arrange bespoke updates for a team, for example as part of a staff meeting. We also welcome educators to engage with CPD activities at the university. You can attend seminars, lectures and workshops, be involved in the admissions process, or engage in student assessment with the tutor team at the university. Please contact sltplacements@leedsbeckett.ac.uk or go to [the HCS Practice Learning Team website](#) for information.

Role of the educator

The RCSLT practice-based learning guidance 2025, advises that all practice educators should:

- be registered with the HCPC as a health and care professional in the discipline associated with their educational role and the students for whom they have assumed responsibility; (although it is recognised that for some placements this may not apply).
- uphold the values of person-centred professionalism;
- be aware of the policies of the relevant professional body (ideally holding active membership);
- understand their roles and responsibilities as a practice educator and be aware of local, national and UK policies and regulations relevant to learners;
- support and facilitate the learning of others (as appropriate to the workplace) as part of their broader professional role including - students - peers - colleagues from other professions - support workers - unqualified workers - service users and carers;
- understand and apply their scope of practice as an educator / facilitator thus ensuring that their knowledge, skills and values remain in line with appropriate evidence base;
- take responsibility for acquiring and developing the knowledge, skills and behaviours required to facilitate and support the learning of others;
- undertake initial practice educator preparation and training, facilitated by the education provider relevant to the profession;
- engage in on-going continuing professional development (CPD) related to practice education;

- demonstrate and promote the value of practice education to the care of service users, service delivery and career development.

As a result of initial and on-going education and training, practice educators should be able to:

- provide information to learners about the learning experience offered and to clarify/manage expectations;
- apply knowledge of educational theory to learning and assessment practice, creating level-appropriate, inclusive and empowering learning environments and opportunities;
- actively promote policies and practices that acknowledge different needs of students and learners individually and as a group, demonstrating an inclusive approach;
- promote the visibility of practice education and the role of learners within the health and care professional team, amongst stakeholders;
- actively contribute to the assessment of adequate and safe levels and models of learner supervision;
- understand where practice learning fits with taught components of the programme when working with students;
- promote, facilitate and support self-reflection and peer learning;
- provide a range of opportunities to maximise learning and enable the achievement of directed and self-directed level-appropriate learning outcomes;
- apply and contribute to, where appropriate, various forms and levels of fair, inclusive, sensitive, consistent and robust practice education feedback / feed forward and assessment and involve learners in the process;
- communicate in a skilled and effective manner with students, colleagues, service users and stakeholders to support the facilitation of the programme of learning;
- reflect on and evaluate their role as a practice educator and continually implement improvements;
- evaluate the practice learning environment and formal / informal learning events and implement change based on evidence.

The above is taken from The Health and Care Professions (HCPC) Practice Education Guidance 2016.

The **RCSLT practice-based learning roles and responsibilities framework (Word)** explains the role of the educator in the context of an SLT service.

Student assessment and grading

All placement assessment forms should be accessed on PARE. It is the student's responsibility to ensure that their educator is orientated to their specific placement documentation on PARE, so that forms can be completed in a timely manner.

Practice Educators will need to add feedback and sign off the following documents on PARE:

- Pre-placement planning form and the student's aims at the start of the placement
- Attendance / hours Record
- Single Session Evaluation (specific placements only)
- Core Skills grading - mid placement and at the end of the placement
- student's reflective learning logs
- Session Plans
- Support and feedback for negotiated placement projects (final year MSc students only) (please ask student for guidance).

Students are the future of our profession. You are the gatekeepers for standards for the next generation of SLTs, and ultimately, for your clients. From you, students will be awarded a pass mark that states that they have reached the required competence for their level of study. Students have one opportunity to resit a failed practice placement.

Brinsdon et al (2007) note that educators are "crucial to safeguarding our profession" and Welsh (2003) comments that "passing bad students fails us all". Our aim is that all students have enjoyable and successful placements; however, some students need more time and practice to reach the required standard to achieve competence. We look forward to working with you to facilitate this, where it is needed.

Resources for practice educators

All practice educators can become an associate member of LBU staff which provides access to online resources, such as e-journals. To become an associate member, please contact the Practice Learning Team administrator.

The RCSLT provide a wealth of resources for practice educators which is available to members on their website: [practice-based-learning-resources](#)

Educators can find further information and guidance including placement documentation by following this link: <https://www.leedsbeckett.ac.uk/health-practice-learning-hub/#>

The National Association of Educators in Practice (www.naep-uk.org) is a support network for educators in practice across Allied Health Professions, midwifery, nursing and all Health and Social Care Professions. It is free to join and provides resources on its website to members.

Tariff is awarded to practice placement settings from NHS England. This is allocated per student per day and is currently around £28 per day.

Students' responsibilities

Students should be aware of their responsibilities for:

- Managing their learning and professional relationships.
- Alerting the practice educator and HEI to any problems that might prevent progress or satisfactory completion of the placement.
- Understanding that the priority for a clinician is the client.

The Leeds Beckett University student charter sets expectations for engagement and behaviour. Further information can be found via this link: <http://www.leedsbeckett.ac.uk/assets/studentcharter/>

Students should also understand their responsibility to report concerns about safety or well-being whilst on placement. Practice educators should support and encourage students to do this (see [HCPC Standards of Conduct, Performance and Ethics](#)). In the first instance this should include talking to practice educator or Placement Practice Coordinator in the placement setting, or contact their academic advisor at university. Students can also contact the university freedom to speak up guardian: <https://www.leedsbeckett.ac.uk/health-practice-learning-hub/freedom-to-speak-up/>. If appropriate, concerns should be escalated, which may include following local guidelines and/or raising concerns via nhsemployers.org

Planning a practice placement

Placement timetables and calendar

The placement calendar for the BSc and MSc courses can be found in Appendix 3 of this Placement Handbook.

Types of placements

Many SLTs now enjoy 2:1 or 3:1+ student: educator ratio placement opportunities. Teams are encouraged to provide multiple student to educator ratio placements, both as a way of building capacity and to enrich the student experience through supported independence. Remote placements can support multiple students, where IT capacity permits. Tariff is awarded per student.

Multiple student: educator placements

Working with a peer or in a small groups gives students the opportunity to develop their critical appraisal skills through watching and giving feedback to their fellow students. Working together, students can often achieve more than they can on their own; for example, they can share initial assessments by dividing case history and assessment, or running sessions where one conducts therapy and the other records.

'Long-arm' or role-emerging placements

Research has found role emerging placements can provide "unique learning opportunities" (Dancza et al 2013). In long-arm placements students spend part or all of their time in a location where there is no SLT directly on-site. Previous long-arm placements have included:

- Placements in care homes for adults with learning disability

- Placement in a secondary school working with pupils on the SLT caseload and tier 2 pupils with milder SLCN who did not meet eligibility criteria for SLT services
- Placement in a nursing home developing life story work with residents with dementia
- Placement in a day centre for people with complex needs

Students have a named mentor in the setting and receive SLT supervision at regular intervals.

Please contact your link lecturer in the first instance if you would like to set up a placement of this nature.

Preparing for a practice placement

The following responsibilities are set out in the RCSLT Practice-based learning guidance (2025) in relation to preparing for a student placement:

- Familiarise yourself with placement documentation, including the expected learning outcomes of the placement for that stage of the course and student experience to date.
- Think through the range of learning models, experiences and opportunities you are able to provide.
- Consider opportunities you can provide for the student to experience a wide range of speech and language therapy work and roles (communication and dysphagia), both clinical and nonclinical, including administration and wider organisational and management activities.
- Plan for how and when you will provide protected time for student supervision, negotiating any changes to your normal clinical/administration time with your manager.
- Prepare service users, clients or patients to work with the student, in line with your organisational policy.

Service User Consent

Consent must be obtained for student Speech and Language Therapists to be involved with case management and clients/carers must be clear about what they are consenting to. Obtaining consent remains the responsibility of the SLT service that is providing the placement and local policies should be referred to. It may be that information is provided as part of an initial appointment letter. It should also be remembered that carers need to be informed in settings where clients may be seen on their own e.g. in schools. It may also be necessary for the agreement of the school or institution to be sought.

Placement allocation

The PLT requests whole time equivalent figures from each team and then shares the numbers of placements needed for the next academic year from each SLT team. For 2024-25 this is allocated on the basis of 22 placement days per wte SLT.

At LBU we work to an allocation model, with the approval of NHS England and the local Integrated Care Board, and the agreement of local NHS managers and service leads. We use wte workforce data for bands 5-8 SLT staff and calculate the number of placement days needed to match the number of SLT learners at Leeds Beckett University. In 2025 we have planned this in collaboration with York St John University and have agreed to share the Trusts that are geographically close to both HEIs.

In 2025-26, we have agreed that we need 22 practice placement days per year from every wte SLT. This is currently lower than the 25 days the RCSLT state that every wte SLT should provide, and may need to increase in future years.

Prior to the start of the academic year, specific placement allocations are sent out to each provider organisation for the full year ahead. Co-ordinators in each location will share this with educators and identify which educators will provide each of the placement episodes. Educators/Co-ordinators will give the details of the venue and the educator for each placement episode, to the SLT placement administrator.

Student allocation

Placements are allocated to students based primarily on the students' needs in terms of clinical experience. In addition, known health / learning needs or mitigating circumstances are considered.

Placement details are confirmed as far in advance of the placement as possible although this depends on sufficient placements being secured so that students can be fairly allocated. We will always aim to do this 4 weeks ahead of the start of the placement.

Occasionally, placements have to be withdrawn at the last minute due to unforeseen circumstances. We will always contact practice educators as soon as we are aware that a student cannot attend the placement, for whatever reason. Where educators can no longer support the placement that they agreed to provide, an alternative should be provided by the service / organisation.

Before a student arrives

Allocation information

You will receive:

- The name and email address of the student(s) allocated to your placement.
- Please inform the placement unit if:
 - The placement information is incorrect or has changed since the allocation was made.
 - You are not available to be contacted in the two weeks before the placement start date.

Each student's Practice Assessment Document will be made available to you via Online PARE. You will be able to view the following:

- Introductory pages, 'Key information and contact details' and 'This is Me' and 'Adjustments to support my learning on placement'.
- Pages for the upcoming placement, enabling you to check the placement tasks and documentation required.
- EDS Competencies and EDS Hours records.

The student will contact you by email to introduce themselves and ask questions about the placement. They will also let you know by email when they have updated and/or completed the PARE pages 'Adjustments to support my learning on placement' and 'Pre-placement planning form and specific adjustments'. Please sign PARE to indicate that you have reviewed this ahead of the start of the placement.

Release of information to students

Students receive placement details after they have been confirmed by their educators, to ensure that all placement information is correct.

Please wait for the student to contact you, rather than emailing them first as this is part of their professional development and organisational skill learning. Students are instructed to contact you about two weeks prior to the placement start date. At this stage we suggest that you advise on:

- contact methods e.g. mobile phone numbers and times they can contact you. We try to only email students between 8am and 6pm on weekdays to promote a sense of work-life balance, and suggest that they operate the same principle with their educators.
- When you are/are not available in your SLT role e.g. if you work part time
- Placement details, especially time and address for first day.
- Local policies and anything they need to know for the first day e.g. dress code, accessing the location (e.g. signing in and entry procedures), timings, lunch etc
- Pre-arrival preparation/ reading.
- Whether their DBS number / certificate will be required.
- Please discuss any relevant information from the 'student pre-placement planning' form in PARE.

Please adapt the above info as relevant for a telehealth placement.

Some settings have an induction pack which they send out to students; this is incredibly useful.

PARE Profile

Each placement setting has a profile on the healthcare placements website www.onlinepare.net. Check that the student has accessed the placement profile and please share with them any placement-specific requirements not made clear on the profile.

Smartcards

The university funds and issues smartcards to students for use with SystemOne. These need to be activated at local level, and once details of your students are released you should follow local procedures for activation by the Trust IT team as relevant.

Know what to expect – the academic curriculum

The academic curriculum across the BSc and MSc courses is designed to enable students to meet the HCPC Standards of Proficiency (2023) on graduation and are informed by the RCSLT Curriculum Guidance (2025). The learning outcomes of the BSc and MSc vary slightly to reflect the different levels of learning at undergraduate and postgraduate level but can be summarised in the overarching aims outlines below:

Students will be able to:

- Use critical understanding of theory and principles in psychology, phonetics, linguistics, speech and language pathology, research and medical sciences to the assessment and management of people with speech, language, communication and swallowing needs across contemporary speech and language therapy practice. (SOP 4, 13, 14; Curriculum Guidance – SLT clinical & professional capabilities)
- Select, use and modify a range of communication skills to develop successful therapeutic relationships and work in partnership with colleagues, other professionals, support staff, service users and their carers. (SOP 8, 9; Curriculum Guidance - Communication)
- Critically consider their own values and beliefs in relation to the social and cultural contexts of practice and to understand these issues in the lives of individuals and in planning effective, non-discriminatory services for people with speech, language, communication and swallowing needs. (SOP 5, 6; Curriculum Guidance - Partnerships)
- Critically review and apply a range of research, critical thinking and problem-solving skills to facilitate the ability to find, evaluate and create new theoretical and empirical evidence and apply it to evidence-based practice in speech and language therapy over the course of their clinical careers. (SOP 12, 13, 14; Curriculum Guidance – Research and evidence-based practice)
- Reflect objectively and critically on all aspects of the quality of their practice to identify and act upon personal and professional development needs. (SOP 11, 12; Curriculum Guidance – Leadership and lifelong learning)
- Select and effectively apply the skills required to practice as an autonomous professional, exercising their own professional judgement in relation to complex or novel issues in client care (SOP 4) and the professional obligations and requirements of the HCPC (SOP 1, 2, 3, 7, 10; Curriculum Guidance – Professional autonomy and accountability)

In Appendix 2, you can find more detailed information about the student curriculum, including when learners have studied specific areas of speech, language, communication and swallowing disorders. Students will inevitably be allocated to placements in clinical areas where they have not yet had formal curriculum teaching. Where this is the case, please guide them to key reading, websites, videos or podcasts. They can also be supported by resources within the university.

Pre-registration RCSLT Eating, Drinking and Swallowing Competencies

Royal College of Speech and Language Therapists (RCSLT) has provided a pre-registration eating, drinking and swallowing (EDS) competency framework for all students to undertake during their study. Completion of the EDS framework competencies is a mandatory requirement for all students graduating in 2026 on any pre-registration speech and language therapy course. Further information can be found at this link: <https://www.rcslt.org/learning/pre-registration-eds-competencies>

Students are required to evidence a minimum of 16/20 RCSLT EDS competencies during their studies and recommended to undertake 30 hours of adult and 10 hours of child experience on practice placements. Students complete dysphagia teaching and workshops in year 2 (L5) for undergraduates (BSc) and Year 1 post graduates (MSc) which provide opportunities to evidence competencies through practical learning methods in the university stimulated ward, and via group work, e-learning and clinical scenarios.

Students need to have verified evidence for 16/20 competencies in order to complete the course and graduate. We are aiming for students to evidence each competence once through university experience and once on placement.

Please discuss any EDS opportunities with students at their placement induction, mid and final placement grading and please verify any competencies and hours that have been evidenced on the placement. Please see PARE and the EDS information on the Hub.

During the Placement

Induction and planning

Please check your local placement policy for specific induction information/checklist.

You should include the following:

<p>Expectations</p> <ul style="list-style-type: none"> • Please manage students' expectations about what opportunities will and will not be available during the placement by discussing the caseload, setting and typical experiences within these. • Discuss the core skills and EDS opportunities, and what may or may not be experienced during the placement. • Clarify the amount of support you are able to provide. • Appendix 4 details expectations of student development across the placement calendar.
<p>Learning aims and learning needs</p> <ul style="list-style-type: none"> • Students are encouraged to start each placement by developing a list of placement aims, negotiated with their educator. It may be helpful to support the students to make these SMART: Specific, Measurable, Achievable, Realistic, Timely • Discuss the student's pre-placement planning form and agree any adjustments / support required for the placement.
<p>Contact methods</p> <ul style="list-style-type: none"> • Clearly establish contact methods e.g. email, text, and the hours of the day which you are contactable. We discourage students from informing you of illness or non-attendance using text and say that they need to speak to you or someone in your department within working hours only. We inform students to only contact placement educators between 8.00am and 18.00pm on weekdays.
<p>Policies and ground rules</p> <ul style="list-style-type: none"> • Establish what local policies students will need to know e.g. remote working policies etc. Make sure any "ground rules" are clearly explained. • Students have completed the e-learning for health mandatory training. If you need them to complete anything more than this, please ensure access. Sometimes settings want students to read Trust/Organisation polices, for example Health and Safety, Infection Control, Manual Handling, Fire Safety, etc. This may involve arranging access to local intranet.
<p>Academic Advisor</p> <ul style="list-style-type: none"> • Gain contact details for the student's academic advisor in case you need to contact them at all. It is better to have this information in advance in case the student experiences difficulties on placement.
<p>Planning</p> <ul style="list-style-type: none"> • Plan a timetable for placement including regular feedback, mid placement core skills review and end placement core skills discussion. • Agree when students will share documents such as reflections on PARE for you to read through. • Plan a date for the single session evaluation (where required) as you might need to factor in more time for this.

Organising and structuring the placement

A weekly events timetable is provided as this can be helpful to map out a plan across the placement (Appendix 5)

It can be used:

- As a framework for planning the placement with students
- For recording tasks set for students
- To plan a date for the mid point review of core skills
- To plan date for the end point review of core skills
- To plan the single session evaluation

- To factor in time for reflection and giving feedback

Session planning

- Please try to support students in writing session plans as early as possible, and invite them to do as many as they can. All students (except for observation placements) need to complete at least one session plan on PARE for a session that they have carried out and have gained feedback from you.

Single Session Evaluation

- If the placement requires a single session evaluation; please factor this into the placement plan.
- The aim of the single session evaluation (SSE) is for students to have the opportunity for a more formal discussion and feedback session during their practice placement.
- The SSE should be completed with an appropriate client, or can be adapted to relate to a hypothetical case study, where a student might role play a session or part of a session, or it could be adapted to be used for a training session or presentation of a project.
- There are three parts to the SSE: written information, session, clinical discussion.
 - Written information: Students should complete the clinical setting and client profile form, and a session plan and add these to PARE
 - Session: Students should carry out a session or part of a session.
 - Clinical discussion: Students should reflect on the session and then have a formal discussion with the educator, drawing on some theoretical elements.

The educator should complete the SSE feedback form on PARE and discuss this with the student, highlighting areas of strength and development.

Reflective learning logs.

- Students should be writing these in a timely manner and seeking your feedback on their reflective learning. They should then use this as evidence to support their core skill development.

Halfway through the placement:

- Students should complete the evidence section of the relevant core skills form on PARE
- They will fail the core skills if they have not completed this.
- Educators should grade the student's skill development against each core skill.
- Evaluate and renegotiate placement aims
- Complete/arrange the single session evaluation (if required).
- Review EDS competencies and identify any further opportunities for experience.

At the end of placement

- Review and grade the student's evidence of their skill development against each core skill. Core skill forms on PARE should be signed by the practice educator and the student.
- Review EDS competencies and sign off any evidence of experience and sign off the hours completed.

Session planning

One of the important learning needs for students is the systematic planning of intervention and therapeutic sessions. Students must be discouraged from planning backward i.e. thinking of a "nice" game or task and then wondering what objective this will meet!

Students are likely to need your support by thinking through the needs of the selected clients and working through their difficulties linking this to theory to enable them to plan appropriate interventions.

The session plan on PARE and on the hub is a 'blueprint' for an individual clinical session, this enables students to document their rationale and evidence base for the intervention approach. It also supports the students

ability to “think through” and identify strategies they may need to use including potential adaptations to their planned activities in response to the clients’ performance.

The session plan format is intended to be flexible enough to enable planning for a range of placement needs including, assessment, direct, indirect or initial and reviews sessions. If you would rather use another planning template that you feel is more suitable to your setting, please do so.

Feedback and Reflection

Regular feedback is an essential part of the learning process; it gives the opportunity to comment on specific areas that have been agreed as priorities for development between the student and practice educator. Feedback should include specific constructive criticisms on areas of strength as well as areas in need of further development.

When giving feedback, consider:

- The task carried out
- The skills used
- Interpersonal skills
- Personal reflective skills
-

Students should also be encouraged to self-evaluate and reflect in a structured clinical environment (Hill, Davidson & Theodoros, 2012). If a student is able to analyse their own performance highlighting strengths and weaknesses, they are then able to move their progress forward. If they are able to do the same objective analysis in relation to the client, they can move closer to independent planning and decision making.

After sessions, students should be encouraged to reflect either in writing or verbally or both on the outcomes of the session. Students are expected to complete placement reflections, which also gives space for the student to record feedback they are given. Encourage students to keep written notes of feedback you give, or clinical discussions.

Please do give the student feedback on these written reflections. They are reviewed by their university academic advisor, at the end of the placement. They should be signed off electronically in PARE.

Assessment: Core Skills

Students are graded on the Core Skills that are based on the HCPC Standards of Proficiency (SOPs):

<https://www.hcpc-uk.org/standards/standards-of-proficiency/>

Each student year will have specific core skills that support and allow students to demonstrate their learning throughout their placement. The core skills on PARE and on the hub are aligned to HCPC Standards of Proficiency.

The core skills form outlines some examples of activities that can support students to develop and achieve these skills. These are only examples; and not an exhaustive list, equally it is not necessary for students to carry out all activities listed. Where it is not possible for activities to be undertaken, students can take part in a guided, independent activity (e.g. create a summary of assessment or intervention relevant to a particular client group or engage in a clinical discussion about a client they have observed or worked with).

Students are asked to provide examples of learning for their core skills throughout their placement but students will need support from their practice educators to identify opportunities to undertake, that will contribute towards their core skills.

At the mid point and end of a student placement, they will present their core skills containing the evidence to you. You are asked to review the core skills with them and indicate their level of learning, appropriate for their stage of the programme. Guidance on the expected level for mid/end point of each placement is provided on PARE and on each of the core skills forms.

Please note:

- The core skills are assessed as Pass/ Fail
- If the student has had the opportunity to develop a skill but has not shown this development, this is not demonstrated.
- If a student has not had the opportunity to demonstrate a skill, then it would be no opportunity. We ask that you support the student to have the opportunity to evidence the particular skill. Please discuss this with the student's academic advisor if you want support with this.
- If a student fails a placement, they will need to resit the full placement. They have one opportunity to do this. If they fail the resit placement they cannot continue on the clinical course.
- If a student is going to fail the placement or if you have any concerns about the student, please contact the student's academic advisor. Please do this as early as possible in the placement, so that an action plan can be put in place to support the student.
- Your feedback is invaluable to students. Wherever possible, please provide verbal and/ or written feedback for students on their activities and core skills.

There is clear differentiation between the level 1, 1.5, 2 and 3 core skills, against which students should be measured across the duration of the course. Please ensure that you are grading the students against this level, rather than against yourself as an experienced SLT.

Where more than one educator is supporting a student on placement, please ensure that you agree that one of the educators will take the lead in collating feedback and will discuss the core skills document with the student.

The Core Skills documents are on PARE and are on the hub. NB There are separate documents for Core Skills 1, 1.5, 2 and 3. The table below shows the core skills used for each placement and the expectations for passing at the different levels of the course.

Placement Calendar 2025-26 & Core Skills					
Dates	BSc Yr1 L4	BSc Yr2 L5	BSc Yr3 L6	MSc Yr1	MSc Yr2
Oct / Nov	Observation Core Skills 1 100% across all sessions		Block placement 1 Core Skills 3 Mid placement: Emerging 75% End placement: Appropriate for level 25% Emerging 75%	Observation Core Skills 1 100% across all sessions	Block placement 1 Core Skills 3 Mid placement: Emerging 75% End placement: Appropriate for level 25% Emerging 75%
Jan / Feb	Conversation Partners Child Development	Block placement Core Skills 2 Mid placement: Emerging 100% End placement: Appropriate for level 100%		Ongoing placement Core Skills 1.5 Mid placement: Emerging 100% End placement: Appropriate for level 100%	
March / May			Block placement 2 Core Skills 3 Mid placement: Appropriate for level 50% Emerging 50% End placement: Appropriate for level 100%		
May / Aug	Block placement Core Skills 1.5 Mid placement: Emerging 100% End placement: Appropriate for level 100%			Block placement Core Skills 2 Mid placement: Emerging 100% End placement: Appropriate for level 100%	Block placement 2 Core Skills 3 Mid placement: Appropriate for level 50% Emerging 50% End placement: Appropriate for level 100%

Mid-placement feedback and pass / fail grading

Educators should:

- Encourage students to evaluate their progress
- Students should add their own evidence to the core skills form on PARE. They will fail the core skills if they do not complete this.
- Highlight students' strengths and areas for development. Discuss any differences between your feedback and the student's own evaluation.
- Allow the student the opportunity to reflect on progress made and plan for the remainder of the placement. Evaluate and re-negotiate the student's placement aims.
- Discuss mid placement grading (pass / fail) (completing the core skills grading form with the student)

If there is any cause for concern at the mid-placement stage it is very important that the educator contacts the student's academic advisor at the university in order to develop a plan of support.

Final-placement feedback and pass / fail grading

Educators should:

- Evaluate the student's evidence on the core skills form.
- Provide face-to-face feedback on the core skills form and grading (pass / fail)
- Adhere to the clear guidance on the core skills form about the level students need to be at to pass the placement.
- Sign the form electronically on PARE

Each placement is a "must pass" component of the course. A student who fails a placement assessment will usually have an opportunity to be re-assessed after further placement experience. Educators are therefore encouraged to discuss matters with the HEI and to give appropriate grading at the end of a placement. Students who are "given the benefit of the doubt" may miss opportunities to achieve the necessary clinical standards and ultimately this benefits no-one. Early identification of problems and support for these are more likely to result in a successful outcome.

When placements don't go to plan

Many students identify placements as the most rewarding part of the course. Despite this, practice education is also an intense learning experience, and concerns or difficulties may arise.

Being supportive

- Make the student feel welcome.
- Create a relaxed atmosphere.
- Be non-judgmental and approachable.
- Placements are a learning opportunity, not a test of a student's knowledge or skill. You are grading their learning throughout the placement and how they are growing and developing following supportive feedback from yourself as the educator. If a student does not know something, please help them to find out, show them or tell them so that their learning is consolidated and grows throughout the placement.
- Recognising that your role as a practice educator as a valued and experienced teacher; and the students will very much benefit from explanations and demonstrations from you.
- Create an appropriate space for giving constructive feedback, with minimal distractions and in reasonable privacy.
- Discuss with student if there are any obstacles that they perceive will affect their ability to achieve their goals. Review these during the placement so that progress can be monitored.

Addressing concerns with the student

Give clear feedback regarding any areas of difficulty as soon as these become apparent. Give concrete examples of areas where the student needs to focus their development. Where possible, this should be in written form, either directly or through the student making notes, but retained by both parties. An action plan template is provided on PARE which can be used to document additional support needed to facilitate the student's learning. Difficulties can usually be addressed by helping the student to formulate a plan of action and setting easily measurable and specific goals, possibly breaking down core skills into smaller steps, with clearly defined targets and dates which can then be reviewed, i.e. if their theory to practice is not strong, ask them to prepare you a literature review on a small area of practice. Observation of an educator demonstrating a particular skill, is very useful for students as they are provided with a direct example of the skill required. Share information about how you manage things, such as time management, prioritisation, caseloads etc. Students may not have any experience with these processes or skills prior to attending university.

Raising concerns

Significant concerns may arise due to:

- Health or learning needs
- Academic or clinical performance which means the student is at risk of failing the placement
- Concerns regarding professional behaviour

Where this is the case, educators should discuss this with the student at the mid-placement grading at the latest and identify clear objectives in relation to the core skills for the student to focus on.

The practice educator must discuss the cause for concern with the student's academic advisor at university. The student will arrange a meeting with their academic advisor to identify additional support needed beyond the placement setting and formulate an action plan. The university placement lead may be involved as appropriate.

The practice educator should continue to support the student as above, using written feedback on a regular basis and retaining a copy. The academic advisor will maintain contact with the student and educator in order to provide support.

Supporting failing students

A placement is successful when the student:

- Passes the placement and can progress to the next placement module.
- Has an opportunity to gain further experience by re-sitting the placement following a failed placement (a student will not have this opportunity if they are given a pass mark by the practice educator).
- Following feedback, has an opportunity to reflect on their own skills and to consider options for their future career, perhaps outside of the SLT profession.

We understand that it can be difficult to fail a student. If you would like advice or support, please contact the student's academic advisor who will be happy to talk things through with you.

Whilst it can be difficult to tell a student that they have not passed the placement, things that help are:

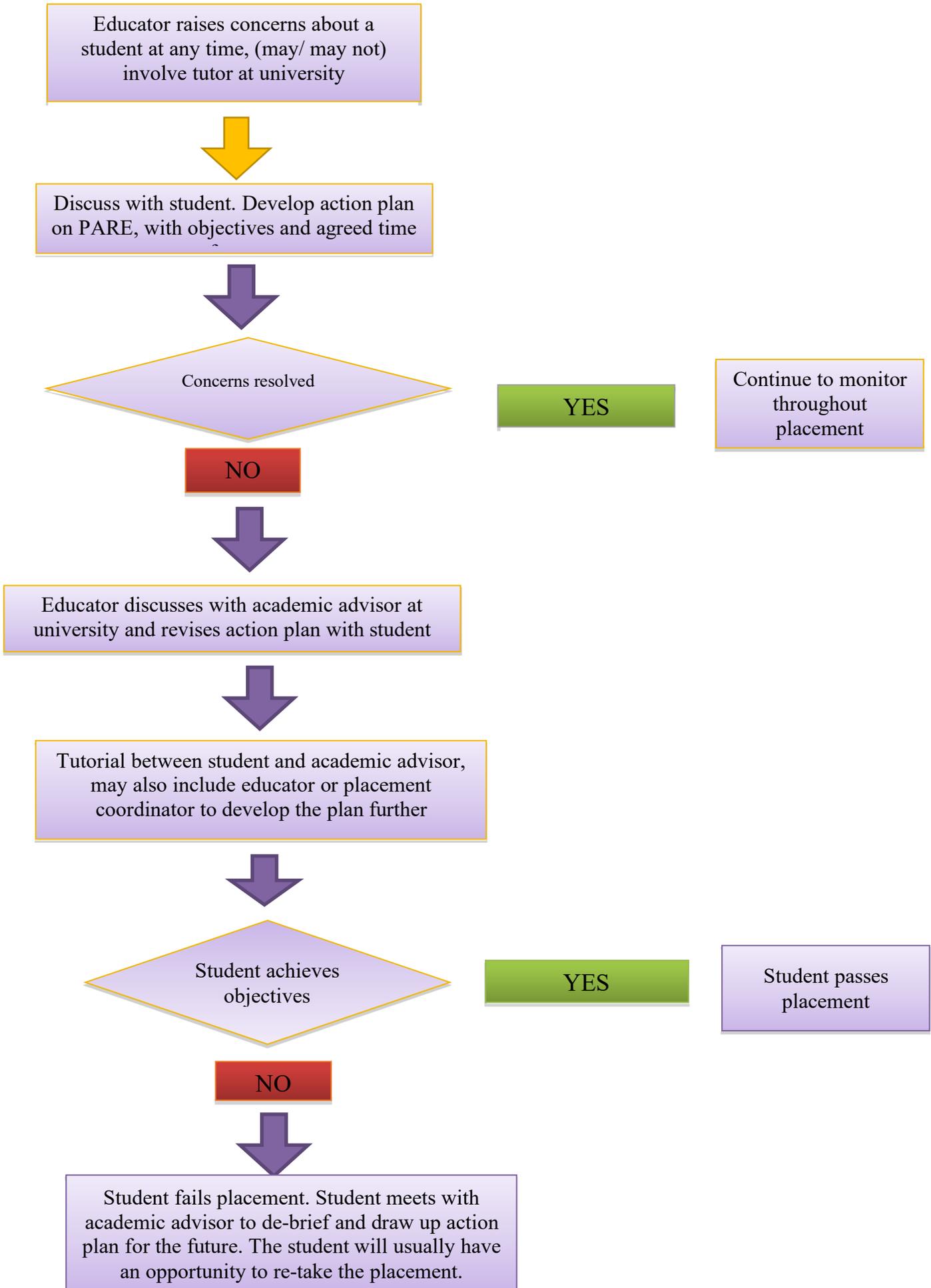
- Having clear written evidence about their performance supported by honest, regular feedback
- Identifying the student's strengths and areas to focus on for development
- Using the core skills to highlight areas that need further attention
- Mutual support between the educator and the HEIs
- Discussing options for the student including key areas for action
- Being as specific as possible is always the key to progress

(Brinsdon et al 2007)

Summary for coping with difficulties

- Discuss progress throughout the placement
- Discuss with the student what they need to do to succeed, rather than just pointing out areas of concern
- Listen to the student's concerns
- Encourage the student and develop action plans with them
- Share your own tips for learning
- Encourage the student to contact other agencies such as student support
- Discuss with your SLT departmental placement coordinator
- Discuss with the HEI academic advisor or placement lead
- Access tutorials and support available at HEI
- Keep written documentation
- Grade honestly, it will be the only way a student can get extra experience if it is needed.

Flowchart for student support



Quality Monitoring

Practice Assessment Record & Evaluation (PARE)

The quality of placement education is crucial to shaping the therapists and the profession of the future. Feedback from students and from practice educators forms the basis for ongoing development, is monitored on a continuous basis by the HEI placement co-ordinator and the practice learning facilitator. This is complemented by two-yearly meetings between the link lecturer, setting placement co-ordinator/educational lead and practice learning facilitator using the audit on the Practice Assessment Record & Evaluation site www.onlinepare.net

Have your say – your feedback

We welcome your feedback on the experience of being a practice educator and would like to know if there are ways in which we can improve the support that we provide to you as an HEI. You can use your own practice educator login and submit feedback at www.onlinepare.net

Accessing student feedback

At the end of a placement (other than the BSc/MSc year 1 observation placement), students will leave feedback on the PARE website. If you would like to be able to view this feedback, please contact your organisation's practice learning facilitator, who will set up an educational lead login. A list of PLFs for each trust is available from the Practice Learning Team. If you are an independent or voluntary provider, please contact sltplacements@leedsbeckett.ac.uk

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Health and Care Professions (2016) Practice Educator Guidance. London: BDA. Available from: <https://www.rcslt.org/-/media/Project/RCSLT/practice-education-guidance-2016.pdf?la=en&hash=28C1D6F9FF0A6B301560DF1BB57A628D6A78F154>

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PART C - INFORMATION FOR STUDENTS

Introduction

Many of our students say that their placements are the best part of the course. We hope that you will enjoy your placement experiences too. In clinical practice you will develop clinical skills and knowledge, adding to your theoretical knowledge from university lectures. Placement settings vary a great deal. Sometimes you will be involved in seeing clients directly and at other times you will be working and learning in a different way. All placement experience is valuable and supports the development of transferable skills, and we hope that you will develop your ability to work flexibly and will gain valuable experiences in all settings.

Practice educators have fed back that supporting students is extremely valuable to their own continuous professional development, service delivery and service improvements.

Here are some quotes from educators:

“Students are a valuable part of our service, helping us develop new ways of working”

“Students inspire clinicians to think of new and novel ways of working”

“Learning from being a practice educator is mutual, as I learn so much from students”

Educators are usually busy clinicians and having a student can add to their time pressures, but remember you can be a great help too:

“students can be a real asset, carrying out audits and projects for and with us, which help us to develop the service further”

“having students as part of the team has enhanced our offer to clients and has been a joy”.

You should start placement ready to learn, embrace learning opportunities offered, collaborate, and be part of the team. Placements can be an exciting but also daunting at times, as there is a lot to learn and for many of you the environments and clients may not be something you have encountered before. However please feel reassured that your practice educators and tutors are available to support you to have a positive and enjoyable experience. Please discuss any concerns with your practice educator, academic advisor or practice placement leads as required.

Your placement experiences are an integral part of your course, and you **must pass all** of your placements to progress through the course.

Placement Allocation

Your placements will be allocated by the Practice Learning Team working with the practice placement leads (Naomi and Jo). Every effort is made to ensure that placement allocation is fair and equitable for all students. Please do not approach Trusts/ Organisations yourself, we have a clear process in place for sourcing and allocating placements.

When allocating placements, a number of factors are considered:

Placement experience required

Every student needs to attend a minimum of 50 days (a day counts as 7.5 hours) of direct clinically-based placement experience across a range of settings, including both adult and child contexts.

Individualising your placement experience:

Health and learning needs

A student's health and learning needs (usually documented in a reasonable adjustment plan) will be taken into account and supported on the practice placement.

Mitigating factors

Any other mitigating factors which impact on placement attendance should be included on the placement planning form on PARE, and discussed with your academic advisor.

There are factors which we will aim to consider when placing students:

- Distance

Placements can take place in any part of the Yorkshire and the Humber region and students will be expected to make their own travel arrangements to get to and from placement. This may include very early starts and long days, some placements may require up to 2 hours travel time. On occasion, staying close to the placement can be an option, and expenses for this can be claimed.

- Finance

Financial circumstances cannot always be taken into account but if you are having difficulties, please seek advice and support from the student money advice service and your academic advisor.

- Preferences

Due to the high demand for placements and the limited capacity available we cannot take student preferences into account. Where possible, final year block placements will be allocated based on a preference on adult or child setting. Students will be informed nearer the time how this process works.

- Student work commitments

Students need to be available to attend placement on all possible placement days on the placement calendar, but we recognise that most students engage in some part time work alongside the course, and we will try to accommodate this, although this may not always be possible.

Types of placement

The RCSLT practice-based learning guidance (2025) indicates the range of placement types, formats and models of supervision that are acceptable for practice placements.

At LBU our placement types are:

- Observation days
- Ongoing placements (one day per week whilst attending university teaching on other days in the week)
- Block placements (four days per week for several weeks)

Placement formats include:

- In person
- Remote / via telehealth
- Shared placements eg in more than one service
- Client pathway placements eg. Acute then community teams
- Interprofessional placements with other AHP students

Supervision models include:

- Face to face
- Remote / online
- Indirect (practice educator is not present in the setting but supports learners via regular brief / debrief)
- Role -emerging (practice educator does not work in the setting, placement provides evidence for a business case to develop the SLT role in that setting)
- Peer mentoring (final year learners support first year learners)

This guidance supports all educators to provide placements in different ways to support your learning on placement and to enable you to be an asset to teams and to support service delivery to clients.

Onsite placements

Onsite practice placements should be taken up in alignment with risk assessments for staff, use of Personal protective equipment (PPE) and other local Trust and service policies re infection prevention and control. PPE should be provided by the placement provider including fit testing of masks, if appropriate. Basic uniforms (trousers and tunic tops) will be provided by the university as per our Uniform policy. Adherence to Trust guidelines e.g. about when to wear/ change uniform is imperative.

Telehealth placements

Telehealth placements should follow RCSLT [Telehealth placements](#) guidance. Students should follow the LBU general guidance re expectations for placements, as discussed in placement briefings. Please agree a supervision plan with your educator re: how you will meet, plan, debrief and receive feedback from your educator in an online format.

Students' IT equipment

Where students are required to use IT equipment for placement, ideally local Trusts will provide these, and students can collect them from Trust premises. If Trusts do not have equipment for students to use, students may use their own personal equipment, if that is permitted by the Trust/ setting. If the student does not have their own IT equipment, the university can seek to support this for the duration of a telehealth placement. If students are using their own IT equipment, they must take all reasonable steps to ensure this is safe.

RCSLT guidance states that where students are providing telehealth services using their personal devices and / or from their homes, the placement provider should ensure that professional and local governance is applied. Please see RCSLT telehealth placement guidance [Telehealth placements](#).

Students should use their university email accounts to contact educators or service users. Students may use their own telephone numbers professionally, if they are comfortable with this and it is appropriate to do so. Students should not disclose their personal numbers to service users; they should alter the privacy settings on their phones or include '141' before dialling. Students should adhere to HCPC social media guidance at all times.

Confidentiality and professional responsibility during telehealth placements

Students must be careful to maintain confidentiality on telehealth placements. They should follow the policy and procedures for telehealth that are specific to the practice education setting.

You should engage in telehealth placements in a private location without interruption. If this is not possible from your home or accommodation, booking a room on university premises may be an option.

You need to confirm in your placement records on PARE prior to attending placement, that you have access to and will use a private, uninterrupted place for telehealth placements.

Students on telehealth placements are directed to:

- Dress professionally
- Carry out calls in a private, quiet, uninterrupted space, sitting at a table or a desk, that is free from distractions of people and pets
- Wear headphones to ensure that you cannot be overheard by others in your household to protect the confidentiality of the client and to reduce ambient noise
- Close windows where there may be a privacy issue
- Use a background that is professionally appropriate, free from distraction and inoffensive. Some platforms support virtual background use.
- Ensure you have adequate lighting so that the client can see you clearly.

Telehealth platforms

You will need to become familiar with the platform that the placement setting is using for telehealth appointments and remote working, and ensure that you follow their policy and procedures. As students, you can access and set up MStTeams meetings from your university accounts, if required. The university does not support ZOOM due to security concerns. Whatsapp and facetime and not approved platforms for students to use to discuss clients.

Telehealth sessions

Please discuss with your educator what to do if the technology fails during the session, or if the client has a health or other emergency.

Please discuss the etiquette of the session with your educator ie if you are observing, do they want you to be muted and turn your video off?

Students are not permitted to record telehealth sessions unless this has been pre-arranged and explicitly consented to by all parties, and for an approved reason.

It will help to close other windows /websites to maximise the performance of the video platform during the session. Be prepared for unexpected interruptions and technology issues, and agree how you will contact the educator / client, if appropriate.

Writing up case notes for telehealth sessions

If the student cannot access the electronic notes system eg SystemOne, they can write anonymised notes / reports as word documents and email to educators. Students should follow usual confidentiality guidelines on written and verbally reported information.

Components of practice placements

RCSLT practice based learning guidance (2025) states that all SLT learners need to access a minimum of 562.5 hours (75 days) of practice based learning. This can be divided up as a combination of sessions as below:

- c) 375 Hours (50 days) of **clinically based practice-based learning opportunities** with competencies supported and assessed by a registered SLT, in a formal placement period. This can include any elements that are part of an SLT's role, for example:
 - Working with clients
 - All admin, planning, liaison and MDT work related to clients
 - Training (delivering and receiving)
 - Universal, public health and preventative work
 - Research
 - Leadership
 - Project work
 - Any simulation opportunities that support practice-based learning
 - Indirectly supervised or role emerging practice-based learning

The balance of these components can be agreed between the practice educator and the HEI, and should be driven by learner competence development.

The 375 hours (50 days) are further broken down into a minimum of:

112.5 hours (15 days) relating to adults

112.5 hours (15 days) relating to children

with the remaining 150 hours (20 days) reflecting local service delivery needs.

- d) 187.5 hours (25 days) of **non-clinically based practice-based learning opportunities** with competencies supported and assessed by registered SLT and / or by other professionals.

This includes:

- Placement sessions where an SLT is not present e.g. nursery / school / care homes; staff in the setting will support the learners in a formal placement period

And also includes HEI-based sessions which may not be in a formal placement period, involving:

- Formal simulation learning opportunities
- Placement briefings/preparation/ reflection / debrief
- Clinical scenario-based teaching / workshops
- Opportunities to meet experts with lived experience
- Practical role play workshops
- Practical interprofessional learning workshops

The focus of these sessions should be driven by learner competence development.

Eating, drinking and swallowing (EDS) competencies are a mandatory element of student practice based learning. Students need to evidence a range of competencies in EDS and achieve a recommended 60 hours of EDS practice-based experience. This is composed of a minimum of 30 hours from clinical practice with adults and 10 hours from clinical practice with children.

Students can engage in any activity that is part of their practice educator's daily role, and these can count towards meeting their practice based learning competencies. Educators may choose to develop practice-based learning activities that are specifically designed to support student learning, irrespective of caseloads and client engagement. These might include:

- Case studies with/without video. These enable students to follow the service user journey from referral to discharge, engage in case history and information gathering discussions, complete assessments, plan and discuss interventions, thus developing clinical decision-making skills.
- Clinical and professional scenarios. Clinical scenarios could involve referral decisions, discharge decisions or breaking bad news. Professional scenarios could involve caseload prioritisation, MDT working or legal and ethical issues.
- Role play. This could involve students practicing and developing clinical skills with educators/peers.
- Sessions with experts with lived experience. These will involve real service users and carers who volunteer their time to support student learning; e.g. provide repeat case history opportunities, repeat assessment experiences, repeat intervention practice, and are an additional source of feedback.
- Project work. This might include health promotion, making resources, life stories, developing training packages, carrying out audits.
- Attending CPD activities, for example: workshops, webinars, enabling theory to practice development. These practice-based learning activities enable a flexible approach to practice placement delivery.

PARE

PARE (Practice Assessment Record & Evaluation) has been launched for 2025-26 for all practice placement documentation. Individual student placement records are now housed in PARE and can be accessed by the student, their practice educator, and their academic advisor. All necessary documentation is visible, including pre-placement planning, reasonable adjustment requirements, placement attendance, placement reflections, placement tasks such as the session plans, single session evaluation, core skills, and eating, drinking, and swallowing competencies and hours. The student, practice educator, and academic advisor will record and sign all placement documents electronically in PARE.

Before you start placement

Fitness to practice

On PARE, you have a checklist of all the mandatory requirements which must be completed prior to your placements. Please read this carefully and ensure that you have read and understand all the necessary information. You cannot attend placement until your mandatory requirements are complete.

Occupational health

At the start of Y1 you will attend an Occupational Health check. As part of the appointment you will need to provide a full immunisation history. Outstanding immunisations will be arranged as required and available. You must attend all your Occupational Health appointments and will be charged if you fail to attend. Failure to attend may also result in a fitness to practice process.

At the start of subsequent years of study you will be asked to declare your ongoing 'fitness to practice'. If, at any point during the course, you need to see Occupational Health then you will be referred by your academic advisor. Please note the HCPC states that registrants must 'understand the importance of maintaining their own health' (HCPC 2023). You cannot attend placement until you are declared 'fit to practice'.

DBS

You will have received your DBS certificate before starting the course. Your DBS clearance certificate will remain an essential document for all years of the course and you will be required to show your DBS number on clinical placement so please ensure you keep it safe. You cannot attend placement without DBS clearance and your DBS number.

Mandatory training

Mandatory training sessions will be required during each year of the course. This will relate to clinical training in areas (see below) to ensure that you are adequately prepared for placement and meet HCPC SOPs.

Mandatory training will take place through the online platform supported by Health Education England called E-learning for healthcare. This programme has been adopted for all Health and Social Care students to deliver required mandatory training modules listed below:

- Data security including information governance
- Equality and diversity
- Health and safety
- Conflict resolution
- Infection prevention
- Manual handling
- Fire safety
- Safeguarding adults
- Safeguarding children
- Preventing radicalisation
- Resuscitation for adults
- Resuscitation for children
- The Oliver McGowan Mandatory Training on Learning Disability and Autism

You will be advised on a timetable for mandatory training at the start of the year. Please contact the Practice Learning Team for advice on your training requirements. Additional online or face to face training will be organised for you as required.

You cannot attend placement until you have completed all your mandatory training.

Smartcard

You will be issued with an NHS Smartcard for use on placement. It remains your property and your responsibility. You may be asked to provide your Smartcard number ahead of placement to enable access to IT resources. You may also be required to attend IT training at local Trusts before you start placement. If you lose your Smartcard you will be charged for a replacement.

Student Placement Planning form

All students will complete a student placement planning form on PARE, prior to starting their placement, with their academic advisor, to discuss their learning and aims for placement. You can share your completed form with your educator on PARE before you start your placement. We encourage students to use this form as a basis for discussion with your educator, in the first session, so that they can help provide the appropriate support whilst you are on placement with them.

Being your authentic self on placement

University placement leads allocate students to placement settings with knowledge of the student and the setting, with the aim of supporting the student to succeed on the placement.

Practice educators need to consider how to tailor the placement to the student, so that they are welcome, valued and feel included. This may involve consideration of health, medical learning differences, religious, faith or cultural differences, gender differences, caring needs or financial commitments.

We work closely with university student disability services and well-being services to help support students with additional needs. When you meet with your academic advisor prior to the placement starting, discuss your learning and progress from previous placements, and any elements that you want your educator to know about in order to plan your placement. Educators need to adhere to the RCSLT guidance for supporting student SLTs with disabilities on placement <https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/supporting-slts-with-disabilities-in-the-workplace/>

All educators need to be culturally aware and culturally competent, including on issues relating to students from the global majority for example, Black, Asian and Minority Ethnic (BAME) students and students who identify as LGBTQIA+. University tutors share and use preferred pronouns and encourage you and your educators to do the same. Please see RCSLT's diversity and anti-racism web pages <https://www.rcslt.org/learning/diversity-inclusion-and-anti-racism/diversity-anti-racism>

If you feel that there has been any form of discrimination including racism, unconscious bias, microaggression and bullying during your placement, please discuss this with your educator, your academic advisor or a tutor that you feel comfortable to approach. You have the opportunity to include this on your placement PARE evaluation and this is followed up at Trust level and taken very seriously. Educators, co-ordinators and service managers should work with HEIs to support students who raise issues about any form of discrimination including racism, unconscious bias, microaggression and bullying during their placements. Students can also contact the university freedom to speak up guardian: <https://www.leedsbeckett.ac.uk/health-practice-learning-hub/freedom-to-speak-up/>. If appropriate, concerns should be escalated, which may include following local guidelines and/or raising concerns via nhsemployers.org

Uniforms and presentation

You will be allocated your uniforms prior to clinical placements. It is your responsibility to ask your practice educator if they require you to wear your uniform or whether there is an alternative dress code. Dress and personal presentation should be professional and suitable for the environment, including for online sessions. Students must avoid items of clothing that are considered revealing e.g. low cut tops or figure hugging clothing. Piercings may breach health and safety and/or infection control policies and students should check the Trust policy / discuss with their educator and be prepared to remove them if requested by the practice educator. If you have visible piercings or tattoos, discuss this with your educator and follow the setting's policy re whether they should be covered up / removed. NHS placements have strict requirements in relation to 'bare below the elbow', based on infection control. This means no long sleeved tops, no jewellery, with

the exception of a plain wedding band (no stones), and no nail varnish or false nails. Sleeves can be provided for students who would be more comfortable with this culturally. Make sure that you wear your student identity badge and carry your DBS number at all times.

Planning for placement

You should receive the following information prior to starting your placement, from the University's placement allocation platform - InPlace:

- Trust or Organisation
- Name of the practice educator
- Contact details (phone/email)
- Location of placement – NB this may be the base of the educator and your actual placement may be in a different location
- Client group (adult/child/specialist area)
- Day and time of your placement
- Start and end date

Check the placement PARE profile online

Each department/ service should have an online profile which can be found www.onlinepare.net . This will provide you with information about the setting and the team, for example the staffing profile, resources, travel, policies. This will help you know what to expect from the placement.

Contact your Practice Educator

You need to do this at least two weeks before the placement starts. Remember: not all practice educators work full time and many work in different places each day of the week. Try to contact by phone or email on the day of the week that corresponds to your placement day. It may take time for them to reply to telephone messages or emails. Only contact your educator during office hours (8am – 6pm) week days.

Plan your travel arrangements

Ensure you know where you are going and how you will get there. Make sure you can arrive for the time provided by the practice educator. Plan your journey; there are lots of apps to help with this. You may want to practice the journey so you know exactly where to go.

We aim to make placement journeys as accessible as possible but your placements can fall anywhere in the Yorkshire and Humber area. Many students will have an early start and long day for placement. If any student has a reason which prevents them from traveling e.g. related to disability, then we advise you seek support from disability services and will we work together to ensure that you are either placed close to home (where possible) or disability will assess eligibility for funded taxis.

Students may be eligible to apply for financial support from the Learning Support Fund. Details, including eligibility can be found at: <https://www.nhsbsa.nhs.uk/learning-support-fund> The fund currently offers support for:

- Students with at least one dependent child (Child Dependants Allowance)
- Travel and Dual Accommodation Expenses for a placement
- Students experiencing extreme financial hardship (Exceptional Support Fund)

Complete any placement reading or preparation

Your practice educator may have indicated specific reading or planning. If there is no specific reading indicated, please ask for information prior to attending placement. Think about the setting and try to do some relevant background reading as well. The RCSLT web pages are a good place to start.

Get everything ready for your first day

You will be expected to arrive with your student badge and your DBS number. The NHS has strict criteria to monitor those working with potentially vulnerable clients and you may be required to produce your DBS

number. Ensure you have this with you at all times. Check with your educator whether or not you should wear your uniform and adhere to guidance about infection control i.e. no nail varnish, jewellery etc. Ensure you are aware of the tasks that need to complete for university on your placement. Make sure you have thought about and completed all pre-placement information on PARE and be ready to discuss this with your practice educator.

During the placement

Placement attendance

Attendance at your placement is a professional requirement and a minimum of all placement days must be attended (or made up if missed) in order to be eligible to apply for your licence to practice at the end of the course. A day is usually 7.5 hours but this will vary across different placements and you are required to record hours attended and agreed with your practice educator.

You must complete the 'Record of Attendance' on each placement and obtain the signature of your educator, as proof of attendance.

100% attendance is required and punctuality is very important. Inform your practice educator as early as possible if you are unable to attend, using the procedure below:

- Contact your practice educator to inform them of your absence as soon as possible in the agreed process and indicate when you are likely to resume attendance at placement. If you are ill on the day of your placement, ensure your educator is made aware. Phone your educator, do not email or text on the day, as an email may not be received, and a text is insufficient. You **MUST** speak to your educator. If they do not pick up the phone leave a voicemail and ring back until you get to speak to your educator or follow the agreed process with your educator. This is the expectation for a practicing SLT so you need to adhere to this system too. A text is insufficient and unprofessional.
- Complete the placement absence form on the Placement Essentials page of mybeckett.
- Missed sessions need to be made up. On return to your placement, discuss with the practice educator how you can undertake further sessions to make up the time lost.
- If the practice educator cancels any sessions, you should follow the same procedure to re-arrange the missed sessions.

At the start of the placement

- Agree how to contact the educator if you are unwell or running late. Many services have processes in place specific to their service and it is important that you discuss and agree this with your educator.
- Discuss the relevant core skills on PARE with your practice educator.
- Discuss your placement planning form with your educator.
- Negotiate the aims you wish to achieve on placement. Be realistic about these e.g. it will not be appropriate to request more work with groups if the setting only offers sessions with individuals.
- Negotiate when you will complete your mid and final grading and your single session evaluation (if required).
- Discuss the relevant session plan forms on PARE with your educator.

Responsibility for client management

The practice educator is responsible for the management of all clients and the clinic/setting, and students undertake duties under their direction. **STUDENTS MUST NOT TAKE DECISIONS WITHOUT THE AGREEMENT OF THEIR PRACTICE EDUCATOR.**

Appendix 4 shows expectations of students across the placement calendar.

Students should make themselves aware of the rules of the clinic/setting and abide by them. It is the student's responsibility to clarify their role within the setting with their practice educator and take on such administrative tasks as is felt to be appropriate. This can include duties such as answering the phone, recording statistics, booking transport, making telephone calls to plan appointments etc.

Professional behaviour

Professional behaviour is essential. You should ensure that you maintain the reputation of the placement organisation, the profession and the university by appropriate behaviour both in public (e.g. on placement, travelling there and back) and in your personal life (e.g. use of social media). You must ensure you are familiar with and adhere to the [HCPC Standards of Conduct, Performance and Ethics](#) and the [HCPC Guidance on conduct and ethics for students](#) as well as the HCPC guidance on social media [HCPC Guidance on the use of social media](#).

Health and safety

You should be made aware of and adhere to the departmental health and safety policies in the settings and clinics in which you are working, including infection control.

Consent

Consent must be obtained for student SLTs to be involved with case management, and clients/carers must be clear about what they are consenting to. Obtaining consent remains the responsibility of the SLT service that is providing the placement and local policies should be referred to. It may be that information is provided as part of an initial appointment letter. It should also be remembered that carers need to be informed in settings where clients may be seen on their own e.g. in schools. It may also be necessary for the agreement of the school or institution to be sought.

Raising concerns

Students have a responsibility to report concerns about the safety or well-being of children or vulnerable adults whilst on placement. Practice educators should support and encourage students to do this. In the first instance this should include talking to the practice educator in the placement setting, or contacting their academic advisor at university. If appropriate, concerns should be escalated by following local guidelines and/or raising concerns via nhsemployers.org

Expectations on placement

Many students identify placements as the most rewarding part of the course, providing crucial learning opportunities and helping apply theory to practice. Despite this, practice education is also an intense form of learning for many students, and can be stressful. You should be aware of your responsibilities to yourself and others. Appendix 4 lists the expectations of each placement across the course.

You are responsible for managing your learning and professional relationships.

You have a responsibility for alerting your practice educator(s) and academic advisor to any problems that might prevent progress or satisfactory completion of the placement.

You should also understand that the priority for a clinician is the client; you should also act in the best interests of the client at all times (HCPC 2023). Remember that you are a guest in people's lives and should show respect and dignity to clients and their families at all times.

Core Skills documents

You can find the Core Skills documents on PARE.

You will need to discuss the core skills in detail with your educator at the mid placement and end of placement.

You should submit your evidence as demonstration of how you have met that core skill. Your educator should then grade you as emerging / appropriate for level, against each skill. The form should also be used to agree priorities for your future development. There is clear differentiation between the level 1, 1.5, 2 and 3 core skills, against which your skills will be assessed.

Where more than one educator is supporting you on placement, one of the educators should take a lead in collating the views of all educators and discussing the core skills document with you.

Placement reflective logs

You should complete reflections whilst on placement to evidence your learning and skill development. Seek feedback on these from your educator and ask them to sign them on PARE during the placement

Mid placement meeting

Discuss your aims and the core skills in relation to your development on placement so far.

You may wish to add further aims to work on during the rest of the placement.

Complete your evidence for the core Skills to date. Your educator will give you a mid-placement feedback and grade (Pass/ Fail).

Review your EDS competencies and hour, and identify any further opportunities for experience on placement. Ensure your hours are recorded and signed by your educator.

End of the placement meeting

Complete your evidence for your core skills and discuss your development over the placement. Your educator will offer feedback and a grade for each Core Skill.

Take on board comments and feedback on your Core Skills and grade (Pass/ Fail).

Review EDS competencies and hours, ensuring sign off from your educator.

Consider aims for your next placement.

Pre-registration Eating, Drinking and Swallowing Competencies

Royal College of Speech and Language Therapists (RCSLT) has provided a pre-registration eating, drinking and swallowing (EDS) competency framework for all students to undertake during their study. Completion of the EDS framework competencies is a mandatory requirement for all students graduating in 2026 on any pre-registration speech and language therapy course. Further information can be found at this link: <https://www.rcslt.org/learning/pre-registration-eds-competencies/>

Please discuss EDS opportunities with your educators at your placement induction, mid and final placement grading and seek opportunity to get EDS competencies signed off on PARE where appropriate.

Problems on placement

We are here to help and everybody involved in practice placements wants you to succeed and pass the placement. If you experience any difficulties whilst you are on placement then you need to contact your academic advisor. It is far better to contact them as soon as you have a concern, then we have more time to help you resolve the issue or put any necessary support in place.

If your practice educator has concerns, then they may also contact us for advice. Please ensure you provide your educator with the name and contact number of your academic advisor at the start of placement.

After your placement

Update your placement record on PARE:

- Attendance Record
- Placement aims – beginning and mid point
- Core Skills Document (including mid-placement and end-of-placement feedback and grading)
- Reflections
- PARE Placement Questionnaire (not Y1 observation placement)
- Session plan with educator feedback
- Single Session Evaluation (not Y1 observation placement)
- Negotiated project (MSc2 block 2 only)

Placement evaluation questionnaire

At the end of your placement, you will complete a questionnaire about your placement via the placement website www.onlinepare.net . These questionnaires are monitored within trusts and by university link

lecturers and form an important part of the quality control and audit of placements. Please complete them professionally and provide information and feedback which will be useful for the development of the placement for future students. If there is not a questionnaire set up for your placement setting on www.onlinepare.net, please contact Elle in the Practice learning team and she will send you an alternative questionnaire to complete.

Complete your placement records on PARE by the deadline advised

Details of placement tasks for each placement are contained in your placement workbook on PARE. Please ensure they are completed by the deadline as indicated in your placement briefing.

Reflect on your learning

Consider how your knowledge and skills have developed, and what you need to take forward to your next placement. Use your reflection and your completed tasks, together with your reflections on university learning, to update your portfolio.

Failing a placement – FAQs

1. Do I need to pass all placements?

Yes. You need to pass all placements in a module to be able to start the next placement module on your course. The clinical placement modules are an integral part of your degree course and must be successfully completed in order to gain the degree award which gives eligibility for you to apply to join the HCPC register as a Speech and Language Therapist. However they are non-credit bearing which means that they do not contribute to the degree classification of the BSc (Hons) – 1, 2.i, 2.ii, or merit / distinction options for MSc students.

2. My mid-placement feedback hasn't gone well – what should I do?

Work together with your practice educator and academic advisor in order to put together an action plan for your development in the rest of your placement. Listen carefully to the feedback you have been given and be proactive in responding to this, focusing on the areas that have been identified for development. See PARE the action plan template

3. What happens if I fail a placement?

If you fail a placement the first time, you will have the opportunity to re-sit it.

Your academic advisor will review your feedback with you, and after discussion with the practice educator make a decision about how many placement days you need to undertake for the re-sit. This is usually the full number of days of the placement, as this will provide you with the best learning opportunity. The tutor team will offer support as needed during the resit placement.

Re-sit placement opportunities depend on the availability of educators to provide additional experiences. It is likely that you will be placed within a different Trust/ Organisation but with a similar client group. The re-sit may run in the following semester, in the summer vacation, or at the normal time in the next academic year. If a resit placement opportunity is not available, you will need to wait until one can be provided.

4. What happens if I fail a re-sit placement?

Failing a re-sit placement means a fail of the placement module overall. There is no opportunity to repeat a placement module so this means that you will not be able to continue with the clinical course. You may be eligible to continue to study for a contained award on the basis of your academic achievement: please speak to your level co-ordinator or course director about this.

5. I have missed placement days due to illness – can I fail my placement?

A student cannot normally fail the placement before she/he has completed the full number of placement days for that placement. However, this can occur in the case of serious professional misconduct and will be dealt with in accordance with the university's regulations and [Leeds Beckett Fitness to Practice Policy and Procedure](#). Follow the link and click on 'Student Conduct'. Missed days should always be made up, if they can be accommodated by the educator.

6. I can't continue on this placement because of health reasons – does it mean I have failed?

If for any reason you cannot start or continue to attend placement then you will need to apply for mitigation. Where mitigation is granted, a new placement opportunity will be arranged when it is suitable for the student to return to placement. A student may be required to be reviewed by Occupational Health to be declared 'fit for practice' before starting placement again.

If you have any problems on placement, then you should contact your academic advisor immediately so that they can advise and support you.

PART D - APPENDICES

APPENDIX 1 - Guidance on maintaining confidentiality on placement and for student assignments Policy updated Sept 2025

1. Confidentiality

Maintaining confidentiality is a core skill for professional practice.

“Service users expect the health and care professionals involved in their care or who have access to information about them to protect their confidentiality at all times” ([HCPC Confidentiality Guidance 2018](#), p.6).

The above statement should guide all students on clinical placements and further detailed information is provided in the HCPC Confidentiality [link above] and HCPC Guidance on conduct and ethics for students.pdf [Guidance on conduct and ethics for students 2024](#).

Students must undertake annual NHS England mandatory training in information governance and will not be permitted to attend placement until this is completed.

2. Confidentiality in the Placement Setting

Students should seek guidance from their Practice Educator at each placement e.g. to find out how case notes are recorded and stored/saved in the particular setting, along with the local organisational policy. Policy and practice will differ across different organisations/services and it remains the responsibility of the student to work within the expectations of each placement setting.

Discussion of clients, clinics, and supervision must not take place where it may be overheard by clients, relatives or others not associated with the clinic.

If you know a client, or you have any connections to them, this should be declared to your educator and a decision will be made about any involvement with the client at that time.

3. Confidentiality during telehealth placements

Students' IT equipment

Some online placement settings will require students to use IT equipment e.g. laptops and headphones. Trusts / settings may provide these for students, and students can collect them from Trust premises, where available. Some settings permit students to use their own laptops. Suitable workarounds sometimes need to be agreed.

Where Trusts/settings will permit students to use their own equipment e.g. laptops/headphones, for placements, and if the student does not have their own, the University can seek to support this for the duration of the placement.

If students are using their own IT equipment, they must take all reasonable steps to ensure this is safe. RCSLT guidance states that where students are providing telehealth services using their personal devices and/or from their homes, the placement provider should ensure that professional and local governance is applied. Please see RCSLT telehealth placement guidance [Telehealth placements](#).

Students should always use their university email accounts to contact educators or service users and only do this within working hours. Students may use their own mobile phones professionally, if they are comfortable with this and it is appropriate to do so. Students should not disclose their personal numbers to service users; they should alter the privacy settings on their phones or include '141' before dialling.

Venues for telehealth / online placements

Students must be careful to maintain confidentiality on telehealth / online placements. They should follow the policy and procedures for telehealth that are specific to the practice education setting.

They should engage in telehealth placements in a private location without interruption. If this is not possible from the student's home or accommodation, then university premises may be an option.

Students need to confirm on PARE, prior to attending placement, that they have access to and will use a private, uninterrupted place for telehealth placements.

Students on telehealth placements are directed to:

- Carry out calls in a private, quiet, uninterrupted space, sitting at a table or a desk, that is free from distractions of people and pets
- Wear headphones to ensure that they cannot be overheard by others in their households to protect the confidentiality of the client and to reduce ambient noise
- Close windows where there may be a privacy issue

• Telehealth platforms

Students should use the platform that the service / Trust is using for telehealth / remote working. Students can access and set up MSTeams meetings from their university accounts. Students are familiar with MS Teams for meetings with university tutors. The University does not support ZOOM due to security concerns. Whatsapp and Facetime and not approved platforms for students to use to discuss clients. Students are not permitted to record telehealth sessions unless this has been pre-arranged and explicit written consent by all parties has been gained.

Writing up case notes for telehealth sessions

If the student cannot access the electronic notes system e.g. SystemOne, they can write anonymised notes/reports as Word documents and email them to educators. Students should follow usual confidentiality guidelines on written and verbally reported information.

4. Data collection for assignments

Students will routinely need to use client data for university assignments and the following guidance should be adhered to:

Data should not be taken from placement settings without the knowledge and consent of the service user, Practice Educator, and/or Mentor in the setting.

Students may need to record handwritten data e.g. observations and take them from the placement setting for analysis. Confidentiality should be maintained, using client initials only, and age, in the form of years and months e.g. 3 years 4 months (not Date of Birth). To minimise the risk of identifying the individual, **no other specific information should be recorded** e.g. addresses, schools, names of professionals involved with the care of the service user or mentors. If needed, a general term should be used such as, "CB attends a local private day nursery for children 1-4 years" not "CB attends Daffodils Nursery in Bradford".

Best practice is to avoid taking any client identifiable documentation from the placement setting. However, if, on occasion, this is necessary, every care should be taken to keep it safe and out of sight e.g. in a folder within a closed bag. If anonymized client information is held on a PC, this must be password protected. Client or setting names should not be used as file names.

5. Maintaining confidentiality in an e-portfolio (Pebble Pad) and student assignments

Students need to understand that sharing of client information as part of academic work must protect the identity of all clients and clinical contexts at all times.

Student e-portfolios are password-protected, accessible only to an individual student and tutors. It is essential that portfolios are developed in a professional manner and confidentiality is maintained throughout. The use of peer names must be avoided, unless on peer attendance records. Educator and university tutor names are permitted as signatures on documentation.

Reflective blogs

When writing blogs, students should not need to identify individuals, so the guidance under 3, above should be used. Avoid using client, educator, staff, peer names at all times.

Placement Records and Portfolio Assessments

Some documents require the signature of a Practice Educator or student peer, e.g. attendance records, core skills, single session evaluations. These signatures do not need to be removed or obliterated, as they are needed as evidence of attendance or achievement. By virtue of being a Practice Educator, clinicians expect to be accountable for their assessment of students and so have tacitly consented for their signature on such documents to be utilised for the purposes of student assessment.

Care is needed with client reports. The usual convention of initials and age should be adopted (see section 3) and any information that could lead to the identification of the service user e.g. address, setting (hospital, clinic), town, school, other professional, names of pets, etc, must **always** be removed.

With all information, professional judgment must be used and decisions must always be based on the protection of the service user. Trust and setting logos should always be removed.

When deleting or obliterating confidential details, always ensure this is completed correctly (e.g. check writing is not visible through blacked-out items that have been scanned). Also ensure that technological functions are used carefully, (e.g. use of highlighting and shading) to ensure that the typing beneath is not visible).

Also, take care of transcripts of the client's speech or language which may include references to names (people and pets) or places. This could still result in a confidentiality breach and should be avoided.

Personal certificates may be used e.g. certificate of attendance at an Interprofessional learning (IPL) day and information does not need to be anonymised. In many cases, the information would be in the public domain and has no bearing on client identity.

Students need to be alert to inadvertent 'leaks' of information that could contribute to the identification of a client, e.g. in document file names.

Names of settings (hospitals, clinics), Trusts, schools, towns and cities and other professionals should not be included at all. Proper nouns should always be avoided.

The above all applies to case studies / simulated clients used in teaching sessions too.

Photographs: students are generally not permitted to take photograph in clinical settings. If this is necessary, e.g. as part of a placement experience, written consent should always be sought, dated and have an identified lifespan.

6. Breaching confidentiality

Breaching client confidentiality in an assignment will typically result in a penalty being applied to your mark. The penalties on the BSc are Y1 5 mark deduction, Y2 10 mark deduction, Y3 20 mark deduction. The penalties on the MSc are Y1 5 mark deduction, Y2 20 mark deduction.

In addition, you may have to attend a clinical tutorial and complete a written reflection. For pass/fail assignments, such as the placement records, this part of the placement will incur a fail grade and will need to be amended within 5 working days. The student may also have to attend a clinical tutorial and complete a written reflection.

Breaches of confidentiality where a client is, or could be, identified whether within or outside the placement may amount to serious professional misconduct and will be dealt with in accordance with the University's [Leeds Beckett Fitness to Practice Policy and Procedure](#). Follow the link and click on 'Student Conduct'

7. Summary & General Principles

In summary, the protection of the identity of clients is paramount. When using information and data from placement, individual judgement is needed to determine the extent to which details need to be removed or obliterated. If several small pieces of information (which alone could not identify a client) are linked together (e.g. within a workbook, or within a portfolio), then the culmination of this could lead to the identification of an individual. Care must be taken to avoid this. Good practice is therefore to omit or obliterate as much specific information as possible, without detracting from the content of the piece of work.

The relevance of any specific information/detail should always be considered (e.g. an unusual diagnosis). For almost all purposes related to student assessment, this very specific detail is not relevant and therefore should not be included. Removal of any specific information will minimise the risk of a breach of confidentiality.

APPENDIX 2 – Curriculum Information

BSc (Hons) Speech and Language Therapy – Curriculum Information

Students study the specific course strands with increasing depth in each year of study

- Year 1 (Level 4): The acquisition of the fundamentals of strand-specific knowledge and skills, including knowledge of clinical processes, and a basic understanding of how these are applied in the clinical context.
- Year 2 (Level 5): The application of the strand-specific knowledge and skills in clinical settings.
- Year 3 (Level 6): The ability to evaluate strand-specific knowledge and skills and their application in clinical settings.

BSc Strand	L4 Foundation	L5 Application	L6 Synthesis
Evidence based practice	Introduction to EBP for SLT	EBP for SLT	Evidence for practice
Psychology	Lifespan	Cognition for communication	
Biomedical sciences	Medical Sciences for SLT	Applied Medical Sciences	
Linguistics & Phonetics	Phonetics and Phonology	Applied linguistics and phonetics	Current Issues
	Linguistics		Supporting Communication*
Speech and Language Pathology	Speech, Language & Communication Needs	Supporting Speech	Supporting Language
EDS	Part of IS1	EDS	
Clinical & Professional development	Academic, Professional and Clinical Skills		Transition to practice
	**Integrated Studies 1	**Integrated studies 2	**Integrated studies 3
Placement	Observation (autumn)	Block (spring)	Block 1 (autumn)
	Conversation Partners (spring)		Block 2 (summer)
	Child Development (spring)		
	Ongoing (summer)		

*Communication disorders includes fluency, voice, LD, autism, H&N, mental health, AAC

**Integrated studies is an applied clinical module – practising clinical skills, related to client scenarios

Speech and Language Pathology Curriculum – BSc (Hons)

In Level 4 (year 1), students learn about the practices and processes of speech and language therapy, and begin to develop discrete clinical skills (e.g. interpersonal skills, taking a case history, administering an

assessment). The applied teaching (Integrated Studies 1) begins at the end of year 1, and students complete this alongside their first ongoing (1 day per week) clinical placement. This takes the format of client scenario-based teaching; they apply learning from all foundational modules to speech sound delay, hearing impairment, aphasia and introductory EDS. Teaching continues across year 2 and the first semester of year 3 as in the table below. In addition, the Year 3 Semester 2 module 'Current Issues' gives students the opportunity to select clinical and professional topics of interest to study in greater depth.

	Y1 Semester 1	Y1 Semester 2	Y2 Semester 1	Y2 Semester 2	Y3 Semester 1	Y3 Semester 2
Acquired cognitive communication disorders (dementia, TBI, Right hemisphere disorder)						
Aphasia – Acquired language disorders		Intro	Clinical language analysis			
Acquired motor speech disorders						
Acquired neurological disorders (PD, MS, MND, HD)						
Cleft lip and/or palate and other craniofacial conditions						
Eating, drinking & swallowing		Intro				
Fluency						
Head and neck cancers &/or traumas						
Deafness						
Developmental Language Disorder		Typical language	Clinical language analysis			
Learning disability and neurodevelopmental conditions						
Speech sound disorders	Typical processes	Delay		Disorder		
Voice disorders and voice modification						

MSc Speech and Language Therapy Curriculum

The first year module 'Foundations of SLT' provides a solid basis in relation to medical sciences, lifespan development, linguistics, and phonetics & phonology. From the outset in Dysphagia, and as the course progresses in the other Speech & Language Pathology modules, students deepen their understanding of cognitive psychology, psycholinguistics, medical conditions and the applications of phonetics and phonology in an integrated way as they cover relevant speech and language disorders.

Year 1 has a focus on peripheral conditions (dysphagia, hearing impairment and both developmental and acquired disorders of speech) while year 2 focusses on central conditions (language disorders, cognitive language disorders) as well as conditions which require a counselling approach (dysfluency, voice).

Strand	Speech & Language Pathology		Clinical Professional Issues &	Foundations/ Research	Placement
Year 1	Eating, drinking and swallowing	Supporting Speech	Clinical Professional Studies 1 &	Foundations of SLT	SLT Clinical Placement A
Year 2	Supporting Language	Supporting Communication	Clinical Professional Studies 2 &	Evidencing Practice	SLT Clinical Placement B

Speech & Language Pathology Curriculum – MSc Speech and Language Therapy

Students cover the main disorders as marked in the table below:

	Y1 Semester 1	Y1 Semester 2	Y2 Semester 1	Y2 Semester 2
Acquired cognitive communication disorders (dementia, TBI, Right hemisphere disorder)				
Aphasia – Acquired language disorders				
Acquired motor speech disorders				
Acquired neurological disorders (PD, MS, MND, HD)				
Cleft lip and/or palate and other craniofacial conditions				
Dysphagia				
Fluency Disorders				
Head and neck cancers &/or traumas				
Deafness				
Developmental Language Disorder				
Learning disability and neurodevelopmental conditions				
Speech sound disorders				
Voice disorders and voice modification				

The EDS Curriculum – BSc (Hons) and MSc

Year 1

Typical anatomy and physiology of swallowing. Neuroanatomy.

Introduction to EDS as part of the module 'Integrated Clinical Studies 1'; this provides an outline of the role of the SLT in dysphagia, awareness of the signs and symptoms of dysphagia and associated risks, focus on paediatric EDS, and practical experience of case history taking with a simulated client.

Introduction of the Pre-registration Eating, Drinking and Swallowing (EDS) Competencies provided before first placement.

Year 2

The Eating, Drinking and Swallowing Disorders module and associated workshops provides focused learning on dysphagia: identification, assessment and intervention, as well as current advances, specialist populations; legal and ethical issues.

Students gain understanding of dysphagia in a wider range of populations (e.g. paediatrics, long term conditions, dementia, head and neck cancer).

Assessment and sign off of some of the RCSLT EDS competencies is by an exam. Students also complete a range of EDS workshops.

MSc (Pre-reg) Year 1

Typical anatomy and physiology of swallowing. Neuroanatomy.

Introduction of the Pre-registration Eating, Drinking and Swallowing (EDS) Competencies.

EDS module and workshops: outline of SLT role, awareness of signs and symptoms, identification, assessment and management, current advances, specialist populations, legal & ethical issues.

Students gain understanding of EDS in a wider range of populations (e.g. paediatrics, long term conditions, dementia, head & neck cancer).

APPENDIX 3 - Placement Calendar for 2025 - 2026

	W/C	University Calendar	Level 4 (BSc)	Level 5 (BSc)	Level 6 (BSc)	Level 7 Year 1 (MSc)	Level 7 Year 2 (MSc)
8	15-Sep-25	Induction					
9	22-Sep-25	Semester 1					
10	29-Sep-25						
11	06-Oct-25						
12	13-Oct-25						
13	20-Oct-25						
14	27-Oct-25						
15	03-Nov-25			Level 4 Observation Placement 1x day per week on Tuesday or Thursday for 4 weeks out of 5 Placement a mixture of days in Mainstream/Specialist/Charity and MDT settings.		Level 7 (Y1) Observation Placement 1x day per week on Tuesday or Thursday for 4 weeks out of 5. Placement a mixture of days in Mainstream/Specialist/Charity and MDT settings.	Level 7 (Y2) Block 1 Placement 4x days per week Mon - Fri for 4 weeks. Adult or Paed setting.
16	10-Nov-25						
17	17-Nov-25				Level 6 Block 1 Placement 4x days per week Mon-Fri. Adult or child setting. Adult or Paed setting. 4 weeks.		
18	24-Nov-25						
19	01-Dec-25						
20	08-Dec-25						
21	15-Dec-25						
22	22-Dec-25				week 5 if needed for catch up of missed days		
23	29-Dec-25		CHRISTMAS BREAK				
24	05-Jan-26						
25	12-Jan-26						
26	19-Jan-26	Induction					
27	26-Jan-26	Semester 2	Conversation Partners (CP) 4x 1hr session. Child Development (CD) 4x half day. Tuesday or Thursday.	Level 5 Block Placement 4x days per week to attend for 5 weeks. Monday - Friday. Adult or Paed setting.	Ongoing L7 (Y1) Ongoing placement x1 day per week for 8 weeks. Tues or Thurs. Adult or child setting.		
28	02-Feb-26						
29	09-Feb-26						
30	16-Feb-26						
31	23-Feb-26						
32	02-Mar-26						
33	09-Mar-26						
34	16-Mar-26						
35	23-Mar-26						
36	30-Mar-26						
37	06-Apr-26						
38	13-Apr-26						
39	20-Apr-26						
40	27-Apr-26						
41	04-May-26			Level 6 Block 2 Placement 4x days per week to attend for 5 weeks. Monday - Friday. Adult or Paed setting.			
42	11-May-26	Level 4 Ongoing Placement 1x day per week for 8 weeks. Wed or Thurs Adult or child setting.					
43	18-May-26						
44	25-May-26						
45	01-Jun-26						
46	08-Jun-26						
47	15-Jun-26						
48	22-Jun-26						
49	29-Jun-26						
50	06-Jul-26						
51	13-Jul-26						
52	20-Jul-26						

APPENDIX 4 Placement expectations

BSc (Hons) Speech and Language Therapy Placement expectations

YEAR 1 (Level 4)	YEAR 2 (Level 5)	YEAR 3 (Level 6)
Semester 1 (October – December)		
<p>Observation Placement – may be peer Attend 4 days across 5 weeks, experiencing a range of different settings. Focus on professionalism</p>	<p>No placement</p>	<p>Block Placement 4 days per week x 4 weeks, Involves increasing responsibility for running whole sessions or parts of sessions with supported planning. Single session evaluation with educator. Engaging in projects to support the placement setting</p>
Semester 2 (January – March)		
<p>Child Development Placement ½ day per week for 4 weeks then Conversation Partner Placement Attendance 1 hour per week for 4 weeks These placements support the development of clinical skills but are not hands-on supervised clinical experiences.</p>	<p>Block Placement (Jan to Feb) 4 days per week x 5 weeks Hands on work, taking case history, completing assessments or parts of, engaging in sessions, preparing activities for sessions, making notes during sessions and starting to write case notes. Opening and closing sessions and working up to running full sessions where appropriate Engaging in projects to support the placement setting. Single session evaluation with educator.</p>	<p>No placement</p>
Semester 2 (Mar – June)		
<p>Ongoing Placement – April-June Attend 1 day per week for 8 weeks The beginnings of hands-on work under supervision. Joining in with activities e.g. completing part of case history, engaging in an activity planned by the SLT. Working up to planning an activity for a client as part of a session. Maybe running a whole session where appropriate</p>	<p>No placement</p>	<p>Block Placement 4 days per week x 5 weeks, Running whole sessions (or parts of sessions if complex caseload) Responsible for a small caseload under supervision where possible. Single session evaluation with educator. Engaging in projects to support the placement setting</p>

MSc Speech and Language Therapy placement expectations

Year 1	Year 2
Semester 1 (October – December)	
<p>Observation Placement - usually peer Attend 4 days across 5 weeks, experiencing a range of different settings.</p>	<p>Block Placement Attendance for 4 full days per week x 4 weeks, Involves increasing responsibility for running whole sessions or parts of sessions with supported planning. Single session evaluation with educator. Engaging in projects to support the placement setting</p>
Semester 2 (January - March)	
<p>Ongoing Placement – April-June Attend 1 day per week for 8 weeks The beginnings of hands-on work under supervision. Joining in with activities eg taking part of case history, engaging in an activity planned by the SLT. Working up to planning an activity for a client as part of a session. Maybe running a whole session where appropriate</p>	<p>No placement</p>
Semester 2 (April - Aug)	
<p>Block placement Attend 4 days per week for 4 weeks Hands on work, taking case history, completing assessments or parts of, engaging in sessions, preparing activities for sessions, making notes during sessions and starting to write case notes. Opening and closing sessions and working up to running full sessions where appropriate Engaging in projects to support the placement setting. Single session evaluation with educator.</p>	<p>Block Placement – June to Aug Attendance 4 days per week x 5 weeks Responsible for a small caseload under supervision. Running whole sessions (or clear parts of sessions if complex caseload) Responsible for a small caseload under supervision where possible. Single session evaluation with educator. Engaging in projects to support the placement setting</p>

APPENDIX 5 - Weekly Events Timetable

Plan for session	Student's role	Comments/plans	Student's tasks – next session
Day/ Week 1			
Day/ Week 2			
Day/ Week 3			
Day/ Week 4			
Day/ Week 5			
Day/ Week 6			
Day/ Week 7			
Day/ Week 8			