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Grant ID: 013



College of Radiographers Industrial Partnership Research Awards Final Report

1. Principal Investigator(s)	Frederick Murphy
2. Project Title	The clinical experiences of student radiographers
3. Amount of Award	£5552
	as indicated in your proposal (if not why)?
	e or less as indicated in the original proposal. Funding did not extend to
	dyslexia conference but this was supported by the University of Salford
	ed project outcomes (if not why)?
Yes, the aim and objectives we	ere:
To explore the experiences of	dyslexic student radiographers on clinical placement.
Objectives: Discuss the potential impact of	dyslexia on clinical practice
	may be used by dyslexic students.
Identify the clinical support pro-	
	used to investigate the opinions of a convenience sample of dyslexic and hers; this was supported by in-depth semi-structured interviews. Ethical versity committee.
6. What are your significant f	
clearly illustrated the extent of t students take for their own lear	d from the data as outlined in the executive summary. These themes the difficulties some of them experience and the responsibility the rning. They also highlight the need for significant investment in supporting everal inclusive recommendations are made as a result of this study,
	ork for publication (if so where)?
	Dyslexia Association International Conference, April 2011
	n to Radiography Journal (July 2010)
Presentation given at the Univer	
Fresentation to SCOR Equalise	
	e Group (TBA) ve summary of your work (two sides of A4 maximum) aft or final version of the proposed publication can you please

attach.

Executive Summary

On a self reporting scale of clinical tasks there was little or no difference between dyslexic students and non –dyslexics. Some minor traits commonly associated with dyslexics were also reported by students with no learning disabilities and an inclusion support plan for all students was advocated. In-depth interviews of ten dyslexic student radiographers revealed six distinct themes of *visualizing the disability, self protection, strengths and talents, time, the badge of disability and adjustments and support.* Like other healthcare students, some radiography students reported significant difficulties and prejudices and very little structured support in the clinical environment. Despite the Special Educational Needs and Disability Act having been in place for several years, the support in clinical departments fell significantly short of that provided in the universities. The dyslexic students took extra responsibility for their own learning and some had developed complex coping strategies to overcome any difficulties. The following recommendations were made:

- Standard format for documentation and notices: The consistent use of a larger font size and coloured paper would help all students reading clinical notices. All documentation to be available electronically.
- Clinical learning contracts: The contract should include extra time for areas of work and regular breaks to reduce fatigue. The number of hours worked and the learning outcomes associated with clinical radiography should all be clearly documented. In addition there should be a named one to one support for specific clinical tasks and a comprehensive list of resources. A departmental strategy on dealing with SpLDs would also form part of this contract with expectations of students and staff clearly outlined.
- Universal use of IPods: A successful project run at the University of Derby demonstrated how effectively this type of technology can be used with undergraduate radiography students. They can provide an audible and visual prompt, store images, and be a very valuable resource.
- Disability support mentors: These trained individuals would be responsible for supporting students with disabilities; this might include coping strategies or even lifestyle advice. This would not have to be exclusive to radiology since the mentor would be able to identify and assess risks over several clinical departments and gain experience in dealing with these students. It is further suggested that a Practice Education Facilitator, or similar within a trust, might take or oversee such a role. This would also fulfil the vital role of educating staff groups about SpLDs.
- Support groups: Radiography students, especially those with SpLDs should share experiences with each other. This could be done within institutions across cohorts and even wider by having support networks across healthcare disciplines. This informal group could facilitate workshops and deal with any issues associated with dyslexia and clinical learning.
- National forum: A national forum set up (possibly hosted by the SCoR) to provide support and guidance for dyslexic radiography students, but available to all student members. The difference being that this site would consist of audio blogs and other technological learning aids.

- Selection process: A simple checklist of everyday clinical tasks performed prior to admission. This would enable support, if required, to be in place before the course commences and avoid unexpected difficulties post admission. This study has shown that early positive intervention is vital. In all cases a full educational psychologist's report would be undertaken where any students experienced difficulties. A full assessment could then be made for students that may need support beyond what is considered reasonable and may in severe cases question the suitability for training.
- Promoting the profession: It was felt that a lot more needs to be done to promote the radiography profession to potential students by including successful role models with a range of disabilities in the promotional material. This would encourage an inclusive approach supported by a fair selection process (above).

A copy of the full manuscript (7,000 words) is available on request.