

Nursing and Midwifery Disability Students' Disclosure(s) and Experience(s):

A qualitative assessment

Kayla Kemhadjian, Seth Garvin-Smith, & Katherine Rogers
April, 2023

Contents

n	troduction	3
	Methodology	4
	Findings and Key Themes	4
	Disclosure Experiences:	5
	Onus on Students (34):	5
	Negative Atmosphere Towards Disclosure (24):	7
	Varied Responses to Disclosure (26):	7
	Transparency:	9
	Lack of Clear Occupational Health Process (9):	9
	Rights (2):	10
	Confidentiality (8):	10
	Negative Experiences on Placement (15):	11
	Student Staff Treated as Second-Class (2):	11
	Discriminatory Behaviours on Placement (13):	11
	Lack of Support (41):	13
	Learning Contract Unused (9):	13
	Support Person Not Known or Available:	13
	No Known Supervisor on Shift (10):	13
	Little to no Face to Face Support (9):	14
	Little to no Support in Emergencies (2):	14
	Raising Concerns (5):	14
	General N&M issues:	16
	Slow process (10):	16
	Not Supernumerary (8):	16
	Busy Staff (4):	16
	Last-minute Placement Allocation (4):	16
	Recommendations	18
	Works Cited	19
	Appendix 1: Infographic	21
	Appendix 2: Social Science Disclosure and Data Sharing Form	22
	Appendix 3: Participant Information Form	26
	Appendix 4: Themes (Alphabetical)	.28

Introduction

According to the most up-to-date University data, 23% of nursing and midwifery students at Sheffield Hallam University (SHU) have disclosed some form of disability. This number is increasing each year, as shown on the University's internal database, The Source. Most of the nursing and midwifery cohort who have disabilities have what are called 'invisible' disabilities. Invisible disabilities, or 'non-visible disabilities' are physical, mental, and/ or neurological conditions which can, depending on the environment, 'result in challenges with everyday functioning, activity limitations, and/or participation restrictions, and are not immediately apparent, or are "invisible" to others' (Tomas et al., 2022). As such, students on these courses can exert some agency over whether they disclose a disability, how often, and to whom. These decisions are made on a multitude of criteria and cost-benefit analyses which students make more than once over the course of their studies. While nearly a quarter of students disclose their disability to the university, not all these students disclose on their occupational health questionnaire, and a varied amount choose to disclose to placement providers, with even less disclosing to each one.

'Fitness to practice' criteria overrides the Equality Act in the nursing and midwifery professions, and therefore, disclosure of a disability is known to be a perceived risky process for those aiming to start or continue courses in the profession (Stanley et al., 2011). At SHU, the Occupational Health (OH) disclosure process at the university, which is meant to help facilitate disability accommodations and health profession standards, has been described by students as unclear and difficult. This is consistent with reviews and evidence of the process of fitness to practice across the UK (MacLaren et al., 2016). The murky process, and fear of being kicked off their course and out of their chosen profession, results in fewer students being confident in seeking support (Stanley et al., 2011). It is clear from the wider literature, that murky rules, risky processes, and the sensitivity of the individuals receiving the disclosure, all affect a student's confidence in their ability to disclose and self-advocate for support (Howlin et al., 2014).

Disclosure is integral to ensuring access to accommodations while on placement, however, the onus is not solely on the student. As Hill explains, students' experiences on placements are 'heavily influenced by their relationships with placement staff, as well as the organisational culture' (Hill, 2014). Of the twenty placement providers the department uses, sixteen of them are signed up to some form of disability confident scheme. The current process for placement allocation does not consider whether the placement provider is disability confident or not, which means that students are very likely to experience extremely varied experiences over the course of their placements. Students who have a negative disclosure experience early on are less likely to disclose again (Tomas et al., 2022). Moreover, even where the employers are on a disability confident scheme or actively working towards disability equity, the trusts' own EDI reports paint a very negative picture of disabled staff experiences. According to Barnsley hospital's internal Workforce Disability Equality Standard (WDES), 3.91% of all staff have disclosed a disability in 2022, and the overall experience of disabled staff is less positive than non-disabled peers. As a result, the trust explains that staff are discouraged to disclose their disability (NHS Workforce Disability Equality Standard (WDES) Annual Report and Action Plan 2022 Barnsley Hospital NHS Foundation Trust, 2022). Similarly, Chesterfield trust shows a substantial disparity between experiences of disabled staff, especially in terms of negative, bullying behaviour from non-disabled colleagues and the public, which is a picture seen across NHS trusts (Chesterfield Royal Hospital NHS Foundation Trust Workforce Disability Equality Standard (WDES), 2022). Overall, the NHS report highlights that disabled staff 'are nearly twice as likely to enter the formal capability process as their non-disabled colleagues' (Workforce Disability Equality Standard, 2022).

This study sought to find whether students in SHU's nursing and midwifery departments' experiences on placement and with occupational health at the university echo the experiences of

NHS trust staff in the workplace. It evaluated current communication tools and processes of disclosure at the university as well as asking students about their placement experiences. In this way, this study was twofold.

Methodology

This research was done in two parts: a look at the overarching picture of the stages and experiences of students with disclosures to the university and placements, with an eye to record best practices for the department's review, and students' experiences on placement receiving accommodations for disclosed disabilities.

Ethical approval was obtained for this study by the Sheffield Hallam University Research Ethics Committee, Ethical approval number: ER51606886.

The data for this qualitative study was collected via two 2-hour long focus groups, carried out on the 31st of March 2023. 13 participants were recruited from across the Nursing & Midwifery (N&M) Department. The whole Nursing and Midwifery department was emailed to volunteer for the paid focus groups, if they self-identified as disabled, regardless of whether they had told the university, occupational health, or their placement(s). We believe this cohort represents a reasonably diverse voice of disabled students in the N&M department from different backgrounds, levels of study, and courses.

Given the potentially sensitive and distressing nature of the experiences under discussion, both sessions included an initial brief outlining confidentiality, withdrawal, and most importantly, support offerings should any participants become distressed. At the end of the focus group, participants were offered a debrief at the end of the focus group. All participants were paid £30 for their time. The focus groups were recorded, annotated, and themed separately before being cross-analysed and calibrated by team members for consistency.

Findings and Key Themes

Students felt that the onus for disclosure, accessing, and negotiating accommodations with placements were solely on them, and found little to no support from the University where placements were unwilling or discriminatory in response to seeking support. Overwhelmingly, the stories and general atmosphere of both placements and the University support point to repercussions for student disclosure, which they felt was reflected in the general atmosphere of the infographic circulated.¹

These negative repercussions could be in the form of confidentiality breaches, which cause the students to lose trust and confidence in whoever they disclosed to, a slower process and subsequent loss of placement hours, discrimination on the ward, and little to no positive change in receiving accommodations, however reasonable they are deemed. Due to disclosure, students mentioned experiences of harassment and bullying by ward staff, a lack of access to support once on placement, even when support was agreed with a learning contract, and an overall negative feeling regarding disability disclosure from both the University and placements, exemplified by the language on the infographic. Overall, the findings from these focus groups echoed those of the NHS trust staff in the workplace and point to a wider issue of bullying and discriminatory behaviour towards those with disabilities in nursing and midwifery professions (Wilson, 2016).

¹ This infographic can be found in the following appendix.

Disclosure Experiences:

There were over sixty comments in this theme related to the generally negative atmosphere of disclosure at university, placement, and occupational health levels. Students explained that disclosure experiences were inconsistent, as was access to support or accommodations based on who students spoke to. While there were some very positive experiences with specific members of staff, overall, comments in this theme were negative.

Responses centred on the responsibility of repeated disclosure. They explained that accessing accommodations and negotiating support were solely on the student, with some students feeling overwhelmed, incapable, or left without the knowledge to support themselves. Where they did know how to access support or disclose, comments lamented the surfeit of hoops students are forced to jump through to disclose, including repetitive and tiring disclosures, and the negative and 'discriminatory' language on the infographic which frightens and angers some students.

Onus on Students (34):

Comments in this theme centred on students perceiving the university to place all the onus and stress on the students to inform all the organisations and individual staff to get adjustments, and then keep on top of ensuring that they receive adjustments that have been agreed. This process was onerous and time-consuming, as the following four comments detail:

'It just seems like an absolute charter. you know. Go through that, and then having to inform so many other organizations. It's just like, you know, something bigger should be done to kind of take away that stress like placement in all that preparation for placement, and especially you have a disability, that's mental stress as it is, and you know, to have more things to kind of worry about on top of that is just not ideal, really. So, I just say it's a bit of a head in.'

'Well, I've slipped through the net. I disclosed to the University on enrolments that I had, on accepting the offer, that I had a disability. And then it was not until very recently that my learning contract was put in place. And that's because I had to chase it and chase it and chase it.'

Yeah, it was a stressful time because I was having to jump through hoops to get an extension when it should have been automatic, and they were, you know, questioning why I needed one. And, and, and had I had the learning contract in place, it would have just been automatic, and I wouldn't have had to explain a lot of sensitive information to a lot of different people.'

'I disclosed right at the beginning, as I said, to both uni and occupational health from, like, August time. Then, I, still now - in fact I had a meeting yesterday about it - I still don't have any disabled student's allowance. So, the uni have been very much "Well, we can't give you this because you don't have this". And I sent in all my evidence to, to them and to everything like months and months ago. And even with my learning contract. I've only had that a couple like one or two months, and I'm like five months into first year and again I had to chase that up, and then they didn't add anything that I actually needed into it. So, then I had to decline it and tell them, and then again had to keep chasing that up for like another month, because they didn't do it, and some of the support they have got, isn't actually always accommodating to everyone which is what I found.'

Even where students disclosed to the right people, with the right information, they still faced unnecessary hurdles. One student explained that they went to occupational health at the start of

their course and explained their disability and asked for adjustments. Instead of being told who to go to for help with this, they were only told that it was not occupational health's responsibility to give them an adjustment. At this point, some exasperated students are likely to have given up. This student emailed all their course leaders explaining the situation and asking for help and were luckily met with a helpful response from one academic.

Students also explained that they had to fight for access to support even where they disclosed, as getting a learning contract is not automatic once enrolled with disability support on the course.² Overwhelmingly, students in both focus groups were exasperated at the gauntlet they had to run and the tenacity they needed to get support in place, even once:

'I was really hounding people, my student support advisors too, saying, you know "I've I've told you about this disability and I'm wanting a learning contract." And it was, **I had to** chase it all.'

Students summarised that they would only get support if they knew it should exist and fought for it.³ As such, if students couldn't think of any reasonable support on their own, they were unlikely to seek support. They described the thought processes of a cost-benefit analysis students make when deciding whether to disclose. If they previously got support, or the process for disclosure was easy, they were more likely to disclose. However, if students received no support, or perceived that no support was likely to be available, then they would actively refrain from disclosing to anyone, including occupational health.

One student described their understanding of the process as exasperating:

'Hearing what other people's experiences, and then reading that infographic, it's like two completely different things, cos on the, on the thing they're saying like do everything yourself. And then, when people try and like, reach out and disclose stuff it's like they get nothing back. So what are you actually supposed to do sort of thing?'

Another explained that they disclosed to occupational health but found disclosing to placements tiring. They hoped that their placement team would understand their situation, but they had to disclose every single shift: 'unfortunately, you need to share the sensitive information every single shift to the persons, and sometimes they know your situation.'

They explained that this **repetitive process** affects their motivation to learn:

'You will lose your motivation to learn. You know what I mean. It's like, it is kind of very negative consequences on your health and your motivation, because you already know that you have some difficulties in your health, in your personality, and everything. But you're trying to push yourself to do something and they supposed to support you, but they do that vice versa. It is, it is opposite things completely.'

Others explained that they didn't find the process of disclosing 'worth it':

'To be honest with you, from my previous experience. It's I, I can't see, **it is not really worth to disclose that to the occupational health**. Because, anyway, there is no adaptation to us.'

² See *Recommendations*, p. 18.

³ See *Lack of Support*, p. 3.

Overall, students felt as though they were alone in the process, and without help, were unlikely to disclose.

Negative Atmosphere Towards Disclosure (24):

Students explained that they felt the process of disclosure and accessing support was against them. This was seen to be exemplified by the language of the infographic circulated to Nursing and Midwifery Students about the importance and process for disability disclosure.⁴

There were nine comments specifically about the language on this infographic. These related to how students would not disclose based on the language. The dialogue surrounding disclosure felt 'discriminatory', 'daunting', and 'not really worth' disclosure. One student explained that it wasn't just the form, but the whole process, which felt 'discriminatory':

'I'm sure there's a Disability Discrimination Act. And I think that the University's dialogue around the whole thing is very discriminatory.'

Disconcertingly, there was a consensus from the second focus group (with seven participants) that based specifically on the infographic, students would choose not to disclose and to 'struggle on' because the form expressly mentions 'fitness to practice', but doesn't explain what that means:

Participant 10: Can I just come in there? I haven't just disclosed to occupational health, but reading that infographic that you shared, and it raises the, the notion of fitness to practice.

Researcher: Yeah.

Participant 10: I would, I would just. I, I just would rather struggle on.

The researcher followed up by asking if the student would, based on this infographic, choose to conceal their disability 'for fear of consequences?' to which the student replied, 'yes'.

Varied Responses to Disclosure (26):

Comments in this theme highlight the inconsistent nature of disclosure and access to accommodations for students at the university and trusts. Students explained that it depended on who they told, and not the organisation they told, which dictated whether their disclosure and accommodation experience was positive. Students discussed telling the same type of staff, such as occupational health staff, placement team staff, academic staff, or disability advisors, and getting a wide variety of responses back. While some of these responses were positive, the majority of the comments were negative.

One student explained that responses by placement staff are varied and unpredictable:

'I did have a good placement with a good experience of disclosure, and I find it varies between. So it's kind of luck based, like you're rolling a dice if you disclose. Whereas if you don't, you're risking your health, so it's kind of hard.'

The thread of accommodation and good experiences being 'luck-based' was reiterated throughout both focus groups.

Of students who have had very positive experiences, this tends to be due to specific people, who in most cases, operate outside of their role to help the student:

⁴ Refer to the appendices for the specific infographic.

'I was just gonna say like for me like I've had really good, like individual lectures who have like supported me like, individual people, like somebody phoned me on the train, my AA, and then another person like in the department [Named Person] in the Mental Health Department. She's helped me with like sort out all my disability stuff that they didn't do properly. So that was really helpful. And she did it really quickly.'

Another student specifically name-dropped link lecturers as being invaluable. While it is positive to hear of invaluable support from specific individuals, the experiences the focus groups described were of specific individuals stepping in to fill structural gaps for their students. Therefore, if a student has an academic staff member who is unable or unwilling to act outside of their role to support a student with a disability, then, as the participants in these focus groups explained, that student is out of luck.

The students in the focus groups tended to share their negative experiences, but many expressed that placement experiences were a mixed bag. However, as one student explains, the negative experiences affect whether a student will continue to disclose their disability to future placements:

'Yeah, mine was like a bit both because **my first one was so bad that I didn't report it the second time**, the first one, it was more like they knew about it, so they treated me differently. Because mine is dyslexia, they said things, like really dumbly. So like, things they were saying in nurse form they were saying really basically, but I was like, I need to learn the actual words. And they would think I need to take like, hours to do stuff, so they would just take over. And it was something like that. **But then, my last placement that I just had, they were really good, because it was a different trust, and they seemed to like support you a lot more.** And I had the confidence to actually tell them. And when I told them, they like sat me down and actually talked through what I needed, instead of being like so I've got dyslexia and I know nothing and can't do anything. And then like, especially for them, they had study hours, so you were able to like catch up and put things into place.'

Student experiences seemed to be affected by what sort of disability they disclosed, as they are very much at the mercy of trust staff, and the culture of work at that trust. One student with a mental health condition explained that they had a mixed experience with a negative experience that involved behaviour akin to bullying or harassment:

I had like a bad experience and a good experience. Cause like, my first placement was really good, and like, initially, like, I told like a few people and they were like really accommodating and nice about it, and without like me, like they suggested it, they suggested that I split my like break into bits which is really good for me. Which like my first placement was on psychiatric care which is like, very very intense anyway, but like, my other placement, when I disclosed, they started like, picking at me about it. And commenting on like, things like what I was eating, and like stuff like that, and like locking me, you know like, closing the door in on me and ignoring me and stuff. So that's why I feel, like funny about it now, but again, that was with a different trust, so, like I think it can vary, it's not all the university's responsibility, it can be like you know, what workplace, placement you are.'

This student had described a bad experience with occupational health and accessing university support for their disability, and so, did not seek support from the university for this bullying behaviour. This report will go on to mention a need for procedures for raising concerns, and more support from the university staff for negative treatment for students, regardless of disability status,

on placement.⁵ Most of the students in the focus groups felt that the department and university have a negative culture in terms of disability support, which begins with putting the onus on students to disclose, not sharing information with relevant parties, and ultimately, taking ward staff's 'side' when something has happened.

Unsurprisingly, this student, and others who encountered bullying behaviours while on placement, mentioned that they are considering dropping the course based on their next placement experience:

'I'm basing whether I decide to continue this career or not upon my next experiences. If not, I will just go to a different industry. That's my plan. I'm not thinking about. If I'm going to get not treated right like according to the law.'

While only two students mentioned rethinking their course, several mentioned a loss of confidence and trust in the university and procedures in place meant to protect them.

Transparency:

In relation to the negative atmosphere students felt the university and placements have about disability support and disclosure, students pointed to the lack of transparency around processes, procedures, and support offerings.

Lack of Clear Occupational Health Process (9):

Comments in this theme explained that the timelines, process, and criteria for OH reviews were unclear, and therefore not trusted. Participants explained that there is a lack of clear OH process for students. They were offered no support where they needed assistance with the process and were sometimes given conflicting information. As in other areas, the service students encountered was dependent on the individual, and not the organisation. Finally, students explained that the OH form is not straightforward, and hard to fill out, especially as students aren't sure what the consequences are for disclosing a disability.

One student explained that 'just before Christmas time I had a referral to our occupational health from my course team'. After this referral, they were not cleared for placement by occupational health. However, the process was not transparent or clear, which caused them to lose trust in the system. When they were not cleared, they were told three different things, which were then backtracked on when they queried it:

'So some of it was to with like occupational health and my jabs. One of the responses was the fact that had a referral to occupational health due to my disability. And and then, when I brought this up and said 'Like is that no, no one's told me that me opening up and telling you meant I wouldn't be on placement'. And it was like I got made out to be like the bad guy, as if me pulling up about that. And then they backtracked and said like, 'oh, no, no, we're not saying it's cos of that. It's cos of this'. And which just made me feel like the confidence, confidence and trust that had to tell them. Just wasn't very nice. And then the actual like way to solve it, res, resolution - that's the word - was genuinely was offering for me just to defer.'

Another student was found not fit to study, but was not told what about their application or occupational health form resulted in this. Their appeal went through after a year, and they were left feeling as though it was one person at occupational health deciding that they weren't fit, based on their disability. This process was slow, unclear, and unsupportive:

.

⁵ See p. 14.

'I just, just going to say, the occupational health process is very slow. and the way it works because I had problems on application, and it took like a year for my occupational health to go through. Because of that I didn't have any funding for a year, so I also had to work for an additional year alongside the placements that I did that year, like as a disabled student, because I didn't have any income. because they said I wasn't fit to study. But I was. They just assumed that about me. So I just had a horrible experience with all of it. I've had to have like mental health support literally because of that.'

Rights (2):

Two students pointed out that they are unaware of their rights, and not at any point in the process of disclosing, told what they are:

'What would be useful is knowing what, what kind of rights we have as well, what the University have to accommodate, and what they don't, and reasonable adjustments. Yeah, that's very vague.'

Although neither group spent too much time on this specifically, as it was not one of the questions, it was clear that students wanted to know more about what they should be requesting and receiving, so that they could fight for it.

Confidentiality (8):

Comments in this theme highlighted that staff would CC in other staff at university or placements whether a student wanted their personal information shared with different staff members, but that they would wave their hands and say they couldn't share a learning contract to placement staff due to 'confidentiality' or 'GDPR'. The student described a time where they had an issue with a student wellbeing advisor. They reached out to the team and asked for a different advisor. However, the email response they received CC'd the person they had an issue with. The student added:

'so again, confidentiality. But then what really annoys me about that is the fact that Uni tried – well I believe, I feel like – **Uni tried to say that we can't sort all the disability stuff with students with placement and occupational health because of confidentiality**. And although I don't believe it is completely that I feel that that's what they try to pin it on like. Oh, you'll have to sort this, and you'll have to do this. Oh, it it cause of confidentiality! But then they don't have a problem with breaching it other circumstances.'

This was not the only case where a student mentioned that someone they named as having a specific problem with, or incident with, was then CC'd into emails they sent privately to someone else seeking help:

'like my link lectures and stuff they'll like, I'll email them privately, and they'll CC all the other nurses I have an issue with, and she'll be that also [student name] had this issue, she said this. And she puts it. They put it all in the email. And I'm just there, like I wanted you to discuss it privately. That's why I didn't add them in the email in the first place, but when they respond to me, they add everyone in. And then, I'm then, I'll just give like a basic response. Like okay that's fine, I'll sort it out myself then.'

As the above quote describes, this breach in trust caused students to feel as though the university is unwilling to support them, and not on their side: 'Yeah, and like they'll always back the nurses and stuff more than they'd back me. And Uni does that a lot.'

Students expressed their frustration at this lack of confidential support: 'Yeah It's just really frustrating that there's no go to people that can sort it out, and, and that that that can, that you can contact in confidence throughout your course.'

The focus group participants asked for a more transparent and fair data sharing agreement, so that they can have shared ownership of their disclosures, and not be told that they cannot get support due to 'GDPR'. Different departments within HWLS have different processes and procedures currently in place to cover learning contracts which can and should be rolled out across HWLS. ⁶

Negative Experiences on Placement (15):

Comments in this theme paint a worrying picture of ward staff treating student staff negatively, especially where the student has disclosed a disability. In some cases, as shown above in the section on confidentiality, where students told various academic or university staff, they felt the academic or university staff, which should be on their side, picked the trust or nursing staff's side and did not protect them. This meant students would not bring any issues up in future. Unfortunately, the negative placement experiences students mentioned point to a larger picture of bullying cultures within the NHS, which is increasingly being researched (Capper, et al., 2020; Gillen, et al., 2008).

Student Staff Treated as Second-Class (2):

Two students specifically mentioned being treated as 'second-class citizens' on placement. This was agreed as the overall atmosphere for most placements, and staff behaviours on ward dictated student disclosure and access to accommodations.⁷

Discriminatory Behaviours on Placement (13):

Where students in the two focus groups disclosed a disability to placement staff, this often resulted in repercussions by ward staff. Students therefore felt unprotected and as if it is better to not disclose. This matches the various WDES reports by the various trusts within which our students go on placement.⁸

As already discussed, one student explained that after they disclosed, ward staff on the psychiatric care unit started picking at them about their disclosure and 'commenting on like, things like what I was eating, and like stuff like that, and like locking me, you know like, closing the door in on me and ignoring me and stuff', which made them not want to disclose again. This student explained that it was a shock, as some previous experiences they had on mental health wards were the opposite, with lots of staff disclosing their own related conditions.

One student described an experience they had on their first placement, where they wanted to keep a small 'circle of people who are aware of my disability', such as their practice assessor and supervisor. However, somehow, it got round the whole trust without the students' permission:

'Everyone knew I had a learning contract, and it was just kind of like, my confidentiality has been breached in a kind of way, and I felt a bit bruised by it. Obviously I'm not ashamed of my disability, and it doesn't define who I am, but I came in confidence and told ya, and now, everyone knows, kind of thing, and now everyone is treating me kind of differently, you know, and me, I don't like to kind of stand out - so, yeah, that just really kind of, you know, I don't - I would say gave me a little bit of anxiety.'

⁶ See *Recommendations*, p. 18.

⁷ For more on this, see *Disclosure Experiences* on p.4.

⁸ See *Introduction*, p. 3.

While this was not the case for all the students, many of them mentioned being concerned that something like this would happen if they disclosed. Moreover, students described that on multiple wards and trusts, various staff would make it their business to diagnose or disagree with a students' disclosed disability, which affected their treatment and working conditions.

Two students mentioned a theme of staff members googling their condition and becoming selfidentified experts in it:

'So yeah, I just had a few issues in terms of, you know, disclosing my disability, and just a few staff members that did, that, I don't know whether it's their age, so they don't really understand kind of how a disability can affect a person. And you know, Google is kind of your best friend and your worst enemy when it comes to disability, because it will just label out the main things of a disability, and they don't really understand the whole picture of how it can affect your every single day life. And so that was the **the reason why I had to literally leave placement was a staff member literally brought me to tears** [...]So yeah, so she was basically, just saying that I'm more than dyslexic. Dyslexia only affects your reading, and writing, she said that I'm incapable of being a nurse [...] And I just thought, Wow! Like this is what people go through every day, like, **this is why people don't want to disclose their disability, because as soon as you do it gets thrown right back in your face.** And it was just awful, and she even said more things that I don't even want to get into [...] and it's just like. What else have you been saying that I haven't heard you say?'

This was unfortunately not the only example of a student being treated poorly on placement due to disclosing their disability.

'I mean, I've had multiple times where I mean, there's one time that sticks out in particular, where I'll be struggling cos I can't, I'm not physically able to do as much stuff as other people, and the it, I just remember training is with one of these people, like walking around with them, and she's just like, well, I'm 50 years old, why are you struggling? Why are you, you know, find this difficult? It's like, you know, I just struggle, and it was just you get a lot of that attitude from people on placement, and I'm not going to share what's wrong with me to that sort of people [...] it's just, it would be really nice to have some support in there. I don't feel like when I am on placement, that I am getting support with my condition where I'm telling people.'

In most cases, where a student had a bad experience on placement, or where they lost out on hours due to their disability, there was little to no support expected or received by the university. One student explained that they had an 'atrocious' cough and kept getting sent home because placement staff wouldn't listen to them when they said that they had done COVID tests and that their cough was just part of their condition.

Not all the discriminatory behaviours mentioned in the focus groups had to do with disability. In some cases, students brought up issues around race and religion. In one case, a student fasting for Ramadan asked their placement if they could go home an hour early instead of taking their break, because people in the kitchen area kept making back-handed comments like 'Are you not feeling hungry?' which the students felt uncomfortable with, like people were 'rubbing it in [their] face'. The student felt that the reason they could not go early was due to not being supernumerary, but this was only conjecture, as they were not given a reason for refusal.

Lack of Support (41):

Comments in this theme show an overarching issue of a lack of support for disabled students on placement or with the University. Students were left to fend for themselves and could only access support if they had a good individual staff member on their side, or if they knew about specific support that should be offered and then fought for it to be implemented. Where students had a learning contract in place with the university, these were not used to allocate placements or implement support on a placement.

Learning Contract Unused (9):

Students feel as though their learning contract is 'just a piece of paper' with little to no meaning. In cases where they disclosed their condition to all the relevant university parties and needed specific placements, as agreed in their learning contract, their learning contract was unlikely to be considered by the placement allocation team:

'Yeah, I've had quite a well, not. It's kind of similar where I've disclosed my condition to occupational health at the uni and I said, I can't go on certain wards because of it. And, and then I've received a placement with that ward, and it's like I've got to do all this I call it faffing around to try and sort it out, which is obviously very stressful.'

Where their learning contract does not restrict their placement allocation, there was still little positive commentary on the effectiveness and use of learning contracts for students on placement. Effectively, students said there is no enforcement/protection of disability rights on ward.

One student put it succinctly: 1 was just gonna say it makes me kind of angry because basically it doesn't matter if you disclose or not, because there's no one there to enforce your rights, anyway.'

Students described a myriad of experiences in which they asked for adjustments that were then not received. They explained that there is little to no communication on the wards, and their supervisors or whoever it was they told about their condition and agreed adjustments with, was not often, or never, on shift when they were. This was described in the overall recovery plan report and is a worrying trend for students of different, and intersectional, minority groups.

Support Person Not Known or Available:

Comments in this theme highlight a lack of accessible, quick, face-to-face support. Students greatly desire face-to-face support to build trust and confidence. They explained that they were not introduced to supervisors on different placements, and where they were, were often without a supervisor or known individual on shift, which left them alone when they needed support.

No Known Supervisor on Shift (10):

Several students in these focus groups, and in the overall nursing and midwifery recovery report, described many situations in which they did not have access to a supervisor on their shift. One student explained that their experiences so far have always been chaotic:

'Often my supervisor is off on holiday when I start, so I wouldn't even know who to go to, and I'm never allocated one before I start. The first 2 weeks of every placement I've been on is people arguing about who's going to supervise.'

Students explained that where they do know who is in charge that day, this is constantly changing, which makes it impossible to have any continuity or support in place:

'I think the difficulty is that for every shift, there's a new nurse in charge who's setting up that shift. There's new support staff, nursing associates, new nurses that you're working with you. You don't work with the same people consecutively. So if you were to disclose it every single time that does become quite tiring, and people aren't generally supportive, in my experience, on placement anyways. So they, they, because you're working with so many different professionals all the time, it's, it's really difficult to, it, to, to get adjustments.'

Little to no Face to Face Support (9):

Where students have had a supervisor who is on shift at the same time as them, they rarely receive the amount of support or check-ins they are meant to have on paper:

'The difficulty is, with the nature of the job, obviously you get called away in certain situations, and and students often get overlooked with their initial interview, midpoint and final interview. And even when you do have the interviews, I've just come off placement, and it was a very good placement, I passed it. But even when you do have the interviews, it's only focused on achieving the goals, meeting the proficiencies, getting your episodes of care in, professional values. It's none of, that, that, they they're not concerned in how to support you to achieve that. It's just how you're going to achieve it. If that makes sense?'

Overall, participants in both focus groups expressed that there was little, or no sufficient face-to-face support for them on placement, or with the university. From these comments, they assembled some of their recommendations, such as having a specific advisor with in-person check-ins, which remain confidential.

Finally, students explained that where the university offers support, a lot of it is over the phone, which they feel is not the best way to handle some of the delicate situations they face:

'Sheffield Hallam, you talk to someone on the phone, and there's so many things that you cannot simply figure out, and they say, probably because of COVID. But COVID is gone now. It shouldn't be on the phone. Some of us we don't want phone.'

This over the phone support included where students needed to speak with occupational health, which a student explained was complex to navigate over the phone, especially due to differences in accents. However, there was no option given to the student to speak to anyone from occupational health face-to-face, and they presumed this was due to COVID-19.

Little to no Support in Emergencies (2):

For the two students who had encountered one, they emphasised that they received little to no support if there was an emergency.

Students explained that they would lose out on placement hours as there is no contingency plan for placement allocation or hours. If a student could no longer due a specific placement, they were out of luck and offered no additional support, even where this occurred due to their disability.

Raising Concerns (5):

Research is increasingly being done on nursing and midwifery students' experiences with bullying and harassment whilst on placements (Capper, et al., 2021). The growing body of research suggests that the perpetrators are more than likely to be the student's mentor or practice supervisor, which calls into question the efficacy of current whistle-blowing procedures for students. In the literature, there are many reasons why vague whistle-blowing policies fail to support the people who need them. There is a recent scholarly consensus that NHS-specific whistle-blowing has led to little learning and reform (Powell, et al., 2022).

As highlighted in the literature and in this report, students tend to 'carefully consider the personal consequences of raising concerns before doing so' (Jack et al., 2021). This is even truer where the concerns do not directly affect patient safety, but the students' own wellbeing. Students in these focus groups tended to opt to fend for themselves, and attempted to stick out poor treatment, due to assumed lack of support for discrimination, bullying or harassment they encountered on ward.

Comments in this theme highlight a lack of extensive whistleblowing policy and/or support from the University for mistreatment by staff, and/or discriminatory or bullying behaviours on placement. Students highlighted that where they raised a concern, they were unsupported by university staff. This was seen to be because university staff favoured keeping relationships with trusts over supporting students. This led to students giving up and accepting being treated badly while on placement. In extreme cases, students mentioned considering dropping the course or, spoke of students they knew who considered taking their own lives.

As already discussed, students described an overall negative placement atmosphere where bullying and harassment are common-place: 'So, the ward staff can say whatever they want to you. And there's no one there.'

Some students discussed that they were treated well before they disclosed their disability, and then after, that this changed, and they were unsupported by the university:

'And then, actually, I've been treated negatively as a result of that. and like, I can't do my job. And then the University obviously haven't gone into intervene or anything. So I've had to leave the placement. But that's not really on me in a normal job.'

Students rightfully pointed out how this felt unfair. In what they referred to as a 'normal job', they would be more supported, because there are policies in place to protect them from being discriminated due to their disability. These policies, however, they do not feel are in place for student staff. This is because they cannot use the trust's policies, as they are students, and they feel the university will not support them, or has not supported them where they have tried to submit a complaint or issue.

Moreover, a student explained that one of the reasons they avoid disclosing or speaking up about any behaviour tantamount to bullying, is because they have seen that there are repercussions on the placement for the student, especially where that student is a person of colour:

'This is one of the reasons why I avoid saying anything or like raising my voice about certain stuff is that I've seen it happen to where, if the student does go, report to the Uni and inform and get some help from the Uni. The nurses and staff will be annoyed, and they will gang up on you. And they'll just be on edge with you, and the thing is, I, I'm a person of colour, and I've seen, and it happens a lot, but I'll be talking about my experiences with other, those of colour, and they say the exact same thing like that. We all know the wards, which one's are, and we know the staff that are too, but none of us would go approach, because we've seen what happens if you go, report - that's it. Like they're gonna make your life hell. They're going to fail you for what? You just got to sit there quietly and take it.'

This was not the only example a student gave of students sharing information about wards or placements that others had deemed to be bad. However, it is unclear whether or not this information is being passed onto the university, as students seem to overall have a negative perception of the support the university will give if they share these negative experiences. As the

above quote explains, in most cases, the students choose to 'sit there quietly and take it'. It is unclear as to whether there is an investigation into cases where a student requests to not return to a specific placement, or whether these requests feed into any evaluative work between the university and placements.

General N&M issues:

Comments in this theme covered students receiving their placements last minute, not being supernumerary, dealing with slow bureaucratic processes for accessing accommodations, going through OH, or appealing a OH decision. They repeatedly mention staff being seen as 'too busy' to assist students, and not answering student emails.

Slow process (10):

Comments in this theme discussed that occupational health becomes a slow process if a student discloses a disability, which means some wouldn't disclose again. Others explain that appealing an OH decision, accessing support, or appealing a placement allocation are all very slow processes, which caused them to miss out on placement hours and fall behind. Students expressed that these processes were slow whether they disclosed a disability or not.

Not Supernumerary (8):

Students explained that they were not consistently supernumerary.

'We're supposed to be supernumerary but half the time we are not. It depends on the placement I think but yeah, no, if it's a ward placement, you're definitely put in there as a health care assistant, from my experience, you were.'

The lack of staff on placement affected whether students got their proficiencies signed off, and in some cases, they felt this affected their disability support. One student explained that they requested to leave early as what they felt was a reasonable accommodation:

Yeah, I don't, just saying, just with us being supernumerary, or meant to be supernumerary, then it should be easier for the placement to put in these provisions for for placement, because you're not supposed to be in the numbers, even though we are half the time or more than that. So it shouldn't matter if you need to communicate or leave earlier, or they shouldn't, it shouldn't affect the ward to give to make these reasonable adjustments for you.'

Busy Staff (4):

Staff are seen as too busy to assist or respond to student queries and concerns. Students explained that they felt this had to do with a wider problem within the health industry, which related to the trusts being understaffed and over-worked. Still, while the students understood, they were still negatively impacted, by being over-worked themselves, or by not having their placement proficiencies signed off.

One student explained that their placement assessor was never there when they needed her to sign something. They would be told 'oh you can see that I'm busy'. The student explained that the assessor was a 'nice woman. The ward is busy. They are short of staff. Why, I need to get this still signed off? At the end of the day she didn't sign some important bits.' After chasing this member of staff multiple times, the student ended up failing that placement because the assessor was too busy to fully sign the necessary document. They then got this overridden by a different placement, allowing them to pass, but the stress it caused was unnecessary.

Last-minute Placement Allocation (4):

Students highlighted that sometimes they received their placements a few days out and had no time to appeal or meet with the trust/supervisor to get support in place.

Several students explained that the last-minute nature adds a lot of stress and anxiety to the mix, even where they can do the placement they are allocated. In one case, a student added, 'I didn't have a placement until maybe like 3 days before, and I couldn't even do it. So it was very frustrating, having to call people 3 days before to sort it out. Yeah, it was just insane.'

Another student described that on their allocated placement, their shifts do not stay the same, and they are sometimes changed with little notification. This affects their ability to have work-life balance:

'I feel like it, when they allocate placement, it's more, I feel like Uni does a bit more of it and it's like when they restrict us, like you cannot contact your placement before two weeks, even though we like, we have other commitments to decide. We're not allowed to have a social life, and recently on placement, they, they sent me my off duty but then they've been changing it, and they haven't notified me, and I had to, when I went in I was, I want to book extra, I will get some extra hours in, and then I'll look at the, the off duty and I saw that the dates were changed, and they were like, oh we don't know why it's, but you're moved now, and I was like but, you literally telling me a day before that I have to come in tomorrow again and they're not really as supportive in that.'

Their experience on placement affects their overall satisfaction with the course. These last-minute changes left the student above feeling unsupported by the university, even where it was the trust who changed the schedule. Across the focus groups, students tended to hold the university accountable for issues they had on placement, whether they informed the university of each problem or incident they encountered.

Recommendations

- 1. Implement a transparent process for student disability disclosure and data sharing that allows for confidential information about a student's disability and relevant accommodations to be shared with relevant parties at the University, and with external bodies for placement allocation and disability accommodations.
- 2. Implement regular checks to ensure learning contracts are being utilised by placements, as well as by the university in all processes related to the student's journey, such as placement allocation.
- 3. Allocate and ensure meetings with a face-to-face, dedicated advisor for disabled students with regular check-ins. This person should be able to work with the student to ensure reasonable accommodations for each placement are agreed and implemented, and to assist in supporting the student should they encounter any behaviour tantamount to bullying or harassment whilst on placement.
- 4. **Update and evaluate the whistle-blowing process** for placements for all students, which accounts for the conflicts of interest on behalf of the university towards keeping good relationships with placement providers.
- 5. Make new infographics. Three communication initiatives are needed, one which clearly outlines the new processes in an accessible way for students. It should embed and share new whistle-blowing processes with students at the start of their placements. Infographics should also be made and circulated which outline disability rights for students on placement and at university. This can be done with charities like Disability Rights UK and the Students' Union. Finally, students expressed that they need more understanding of what support is on offer.

Works Cited

- Brown Wilson, C., Slade, C., & McCutcheon, K. (2022). Providing a Roadmap for Co-production in Curriculum Development for Nursing and Midwifery Education. *Nurse Education Today*. *113*. Churchill Livingstone. https://doi.org/10.1016/j.nedt.2022.105380
- Capper, T. S., Muurlink, O. T., & Williamson, M. J. (2021). Midwifery Students' Perceptions of the Modifiable Organisational Factors That Foster Bullying Behaviours Whilst on Clinical Placement. A Qualitative Descriptive Study. *Women and Birth: Journal of the Australian College of Midwives*, 34(6), e608–e615. https://doi.org/10.1016/j.wombi.2020.12.005
- Capper, T.S., Muurlink, O.T, & Williamson, M.J. (2020). Midwifery Students' Experiences of Bullying and Workplace Violence: A Systematic Review. *Midwifery*, *90*, 102819. https://doi.org/10.1016/j.midw.2020.102819
- Chesterfield Royal Hospital NHS Foundation Trust Workforce Disability Equality Standard (WDES). (2022).
- Gillen, P., Sinclair, M., & Kernohan, G. (2008). *The Nature and Manifestations of Bullying in Midwifery*. Ulster University.
- Hill, Shirley. (2014). A Comparative Study of the Experience of Disabled and Non-Disabled Students on Professional Practice Placements. University of Dundee.
- Howlin, F., Halligan, P., & O'Toole, S. (2014). Evaluation of a clinical needs assessment and exploration of the associated supports for students with a disability in clinical practice: Part 2. *Nurse Education in Practice*, *14*(5), 565–572. https://doi.org/10.1016/j.nepr.2014.06.009
- Jack, K., Levett-Jones, T., Ylonen, A., Ion, R., Pich, J., Fulton, R., & Hamshire, C. (2021). "Feel the fear and do it anyway"... Nursing Students' Experiences of Confronting Poor Practice. Nurse Education in Practice, 56, 103196. https://doi.org/10.1016/j.nepr.2021.103196
- MacLaren, J., Haycock-Stuart, E., McLachlan, A., & James, C. (2016). Understanding Pre-registration Nursing Fitness to Practise Processes. *Nurse Education Today*, *36*, 412–418. https://doi.org/10.1016/j.nedt.2015.10.025
- NHS Workforce Disability Equality Standard (WDES) Annual Report and Action Plan 2022 Barnsley
 Hospital NHS Foundation Trust. (2022).

 https://www.barnsleyhospital.nhs.uk/uploads/2022/10/WDES-Annual-Report-and-Action-Plan-2022.pdf
- The Nursing and Midwifery Council. (2023). Latest Hearings and Sanctions. https://www.nmc.org.uk/concerns-nurses-midwives/hearings/hearings-sanctions/
- Oates, J., Hassan, R., & Coster, S. (2021). "We're giving them the tools." A Qualitative Study of Nursing Students Working with Recovery College Trainers to Support Student Wellbeing.

 Journal of Mental Health Training, Education and Practice, 17(1), 1–11.

 https://doi.org/10.1108/JMHTEP-01-2021-0003
- Powell, Martin, Blenkinsopp, John, Davies, Huw, Mannion, Russell, Millar, Ross, McHale, Jean & Snowden, Nicholas. (2022). The Case of the Disappearing Whistleblower: an Analysis of National Health Service Inquiries, Public Money & Management, 42(2), 59—69.

https://doi.org/10.1080/09540962.2021.1892959

- Stanley, N., Ridley, J., Harris, J., & Manthorpe, J. (2011). Disclosing Disability in the Context of Professional Regulation: A Qualitative UK Study. *Disability and Society*, *26*(1), 19–32. https://doi.org/10.1080/09687599.2011.529663
- Tomas, V., Ahmed, H., & Lindsay, S. (2022). Unravelling the Complexities of Workplace Disclosure Among Persons with Non-Visible Disabilities and Illnesses: A Qualitative Meta-Ethnography. In *Journal of Occupational Rehabilitation*, *32*(3), 538–563. https://doi.org/10.1007/s10926-022-10023-0
- Wilson, J. (2016). An Exploration of Bullying Behaviours in Nursing: A Review of the Literature. *British Journal of Nursing*, 25(6), 303—306. https://doi.org/10.12968/bjon.2016.25.6.303
- Workforce Disability Equality Standard. (2022). https://www.england.nhs.uk/wp-content/uploads/2022/05/Workforce-Disability-Equality-Standard-2021-data-analysis-report-NHS-trusts-foundations-trusts.pdf

Appendix 1: Infographic

The image below is the infographic discussed in the report which was circulated to disabled students in the department:

Disability Support for Students on Placement

Step one:

Ensure you are open and honest by declaring any disabilities or health issues on the health screening before starting your course. You will also be asked to declare any changes to your health during your re-enrolment into Year 2 & 3. You should ensure you discuss your disability with a disability support adviser to see what support you can get for campus learning.

The Professional Issues team will send out an online health questionnaire before the start of your course as this is a requirement of entry and is needed to assess your fitness to undertake the occupation. On this form you are asked to disclose any disability or health issues you have, as well as any previous medical history and medication you take.

Depending on your submission, you may need further assessment by a specialist nurse or physician. They can then identify any adjustments you may need and provide these to the University so we can support with this on placement. If you are already enrolled onto the course and you have a change in health status, you may need a referral to Occupational Health for a new assessment and to see how we can support you following a change in your health. This will be arranged by your course team and student support advisor. Please be aware that non-disclosure of health conditions is a breach of your enrolment agreement and can lead to fitness to practise procedures.

Step two:

If you have had adjustments identified at point of entry via your Occupational Health assessment, or as part of an Occupational Health referral whilst progressing through the course and these reasonable adjustments are applicable to placement, you will need to speak with your placement provider after you have received your allocation about your reasonable adjustments.

Please ensure you do this 2 weeks prior to your placement starting, we advise that you do not leave this until your first day as the placement may not be able to support your adjustments without adequate notice.

Important

It is your responsibility to inform the placement area of any adjustments, the placement team cannot disclose this information for you.

Before your placement, you may think that disclosure is unnecessary because your health condition is not relevant to the work. However placement staff are likely to have a better understanding of what the placement entails so an open discussion with relevant staff before the placement starts may forestall problems and enable you to plan for situations that you had not previously considered.

Contacts

Professional Issues - 0114 225 5637 hwb-professional-issues@shu.ac.uk

To register a disability:

Students are asked to register a disability through My Student Record. There is a page on the Sheffield Hallam website with further details on how to register.





BASW, MSW and LDSW Reasonable Adjustments Form Sharing of Information Consent Form (RA1)

	Section 1		
	Name of Student:		
	Student Contact Details:		
	Placement:	Number o	of days:
	Course and Year:		
A	AN ARREST CONTRACTOR C	m University (SHU) to pass or uding my practice educator.	n my reasonable adjustments
	100 C	ng will be held between me, my tutor to discuss my learning n	y placement, my practice eeds and adjustments required.
	Student Signature:		Date:
	Personal Tutor Signature:		Date:
	(Please complete Section	n 2)	
В	60 W1 5007 11 (CO.) Del	ld Hallam University (SHU) to orm to my placement and prac	•
	I understand that SHU an adjustments for me in the reasonable adjustments for I understand I can change practice educators at any choose to disclose my reasonable.	d the placement may not be all workplace context if they are norm. The my decision to share this infortime, in which case I will contains a sonable adjustments form at a take adjustments in the workplace.	ole to make the same not aware of the contents of my ormation with future providers/
	Student Signature:		Date:
			Date:

Reasonable Adjustment Form Placement (Forms RA1, RA2 and RA3) Version: 29/01/2021

Page ${f 1}$ of ${f 4}$ @Copyright Sheffield Hallam University 2021

Section 2

Please outline details of disability below and sign permission statement on Page 1 indicating A or B .			
My strategies already in place to help manage numbers whilst on placement?	ny disability and learning needs		
Is there anything that would help support your le	earning needs whilst on placement?		
•			
•			
•			
Should you need help completing this form plea Disability Student Support Team.			
Student Signature:	Date:		
Personal Tutor Signature:	Date:		
Reasonable Adjustment Form Placement (Forms RA1, RA2 and RA3) Version: 29/01/2021	Page 2 of ©Copyright Sheffield Hallam University 202		

Sheffield Hallam Wellbeing and Life Sciences

BASW, MSW and LDSW:

Reasonable Adjustments Request Form (RA2) For discussion at Placement Agreement Meeting.

Name of Student:			
Name of Placement Provider:			
Date of Placement:			
Placement Base:			
Practice Educator:			
Organisation Practice Learning Coordina			
The following adjustments have been placement and we are able to provide		d for the duratio	on of your
The following adjustments have been converged we are not able to provide for the reason		or the duration of	your placement and
Is the Placement to proceed?	es 📗	No	
If 'Yes' then attach form RA2 to the Pr	ractice Lea	rning Agreemen	t
If ' No' then send form RA2 back to the	SHU Prac	tice Learning M	anager
Signade	Date		(Student)
Signed:	Date:		
Signed:	Date:		(Practice Educator)
Signed:	Date:		(Tutor)

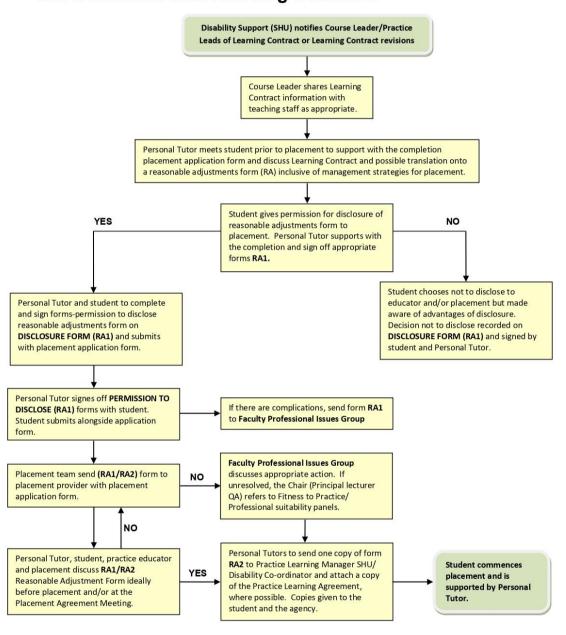
The Tutors should attach this form to the Practice Learning Agreement

Reasonable Adjustment Form Placement (Forms RA1, RA2 and RA3) Version: 29/01/2021

Page **3** of **4** ©Copyright Sheffield Hallam University 2021



Students with Learning Contracts (RA3): Reasonable Adjustments Process for Practice Placements for Social Work Students with Learning Contracts



Reasonable Adjustments Form Placement (Forms RA1, RA2 and RA3) Version: 29/01/2021

Page 4 of 4 ©Copyright Sheffield Hallam University 2021

Appendix 3: Participant Information Form



<u>Participant Information Sheet: Nursing and Midwifery Disability Disclosures and Experiences</u>

What is this about?

Following implementation of the Nursing and Midwifery Placement Recovery Plan by college staff, the university has decided to revisit their overall end-to-end processes in the department. This is a great opportunity to embed student voice into the design and implementation of department processes around disability disclosures and placement allocation and support. Sheffield Hallam Students' Union are keen to understand students' experiences with their various disability disclosures, and their experiences while on placement with accessing support. These focus groups aim to qualitatively measure student experience with disability disclosure and accommodations, with an eye to improving university processes which can improve student wellbeing.

The focus groups will be conducted in two sessions. You have been chosen because you are on a nursing or midwifery course, and have self-identified as having some form of disability.

The information from these focus groups will be anonymised, reviewed, and collated into a report and its findings will be used to inform SU policy and the Nursing and Midwifery department processes. These findings and any recommendations will be shared with key stakeholders within the university.

Before you take part, please ensure that you have digitally signed the consent form: https://www.surveymonkey.co.uk/r/nmdisability

How long will it take?

The focus group will last approximately 2 hours. After this focus group, you will not be required to participate further.

Important information:

- If you agree to take part all conversations will be recorded and transcribed to aid analysis.
- All participants will receive £30 for taking part.
- The focus groups will be done in a friendly environment. You will not be coerced into answering any
 questions you do not want to or engage in discussion you are uncomfortable with.
- The information from these focus groups will be published in a report by the SU research team to change
 university policy. Anonymised data, including edited transcripts will be published with your permission to
 the university research archives at the end of the project.

Your rights:

- You can stop talking at any point and choose to leave without providing an explanation. You have the right
 to ask for anything mentioned or said to be removed from the recorded transcripts.
- Within 2 weeks of your focus group completion, you can contact the Researcher to omit, change or delete
 any data (contact details at the bottom of page).
- Every conversation we have shall be kept strictly confidential, saved in a password protected file that only
 the small research team at Sheffield Hallam Students' Union have access to.
- The research is being conducted within GDPR guidelines. If you have any concerns about how your data is collected or held, please contact k.kemhadjian@shu.ac.uk

Researcher contact details:

Name: Kayla Kemhadjian



Email: k.kemhadjian@shu.ac.uk

Support in adverse circumstances

If you experience any adverse side effects by taking part in these focus groups, please contact the relevant Students' Union, University, or external support services which will be able to help you further.

For urgent or out-of-hours help, please contact one of the following services:

- •In an Emergency Call 999 or visit A&E for life-threatening emergencies. Northern General Hospital is the nearest A&E department to the university.
- Urgent, but not life-threatening phone NHS 111, available 24 hours.

Other, non-urgent support:

Sheffield Hallam Students' Union Support

 Student Advice Centre - 0114 225 4148. You can also come to Level 1, The HUBS to talk to someone or schedule an appointment. Please see: https://www.hallamstudentsunion.com/advice help/

Sheffield Hallam University Support

- University Wellbeing 0114 225 2136. You can also come to Level 1, Surrey Building, City Campus to talk to someone or schedule an appointment. Please see: https://www.shu.ac.uk/current-students/student-support/student-wellbeing
- Disability Support team: 0114 225 2222. Phone lines are open Mon-Fri 8:45am 5pm.

External Support Services

- Samaritans 116 123. 24hr support to discuss personal issues.
- Shout text 'steel' to 85258. 24/7 text service which aims to take you from a 'hot moment' to feeling
- Disabled Students Helpline 0330 995 0414. Provides advice to disabled students who are studying in England.

Appendix 4: Themes (Alphabetical)

The following table is a compilation of all the themes and recommendations students discussed in the focus groups. The Name column refers to the name of the theme, and where relevant, these have been bolded and indented to indicate a hierarchy of themes. There is a description for each theme, including for the title theme. Some bolded themes have no focus group or reference number, this is because they were created to organise sub-themes. The focus group number refers to how many focus groups a theme was discussed in, not the specific focus group where it was discussed. The reference number refers to the number of times it was mentioned, which does not necessarily equate to the number of students who mentioned it. Where a student mentioned an issue several times in quick succession however, this was merged into one 'reference', such as if the researcher asked a follow-up question. There are 54 themes in total. The most relevant themes were discussed in the body of this report. Some themes can be viewed as overlapping.

Name	Description	Focus Group	References
Better Disability Support at Another University	The comment in this theme compared Hallam support to previous universities the student went to, or to what they have heard about other courses from friends/family.	1	1
Confidentiality	comments in this theme highlighted that staff would CC in other staff at university or placements whether a student wanted their personal information shared with different staff members, but that they would wave their hands and say they couldn't share an LC to placement staff due to 'confidentiality' or 'GDPR'. Students mentioned that placement staff they had a problem with being CC'd into the emails they sent in private seeking help from a link lecturer.	1	5
Disclosure Experiences	Comments in this theme related to the generally negative atmosphere of disclosure at University, Placement, and Occupational Health levels. Students explained that disclosure experiences were inconsistent, as was access to support or accommodations based on who students spoke to. While there were some very positive experiences with specific members of staff, overall, comments in this theme were extremely negative. Due to disclosure, students mentioned experiences of harassment and bullying by ward staff.		
Inconsistent Student Disclosure	Students describe experiences of disclosure as being luck-based: it depends on who you disclose to, and even when some people or trusts give you a 'good vibe' the result may not be what was expected. This puts some students off disclosing entirely.	1	7
Equal Treatment on Ward	A student explained that they watch how staff treat students on ward before making	1	1

	a disclosure. If they treat students well, or equally to staff then they'll disclose.		
Individual Staff are Problems	While this was overall discussed as part of varied responses students got from staff, a student explained that the issues they face on ward are because of specific staff, and not seen by them as a cultural issue within the NHS.	1	1
Specific University Staff Member, Helpful	Comments in this theme mentioned specific helpful academic advisors, lecturers, link lecturers, or other university staff. These staff were mentioned to be available, not seen as 'too busy' to help; they responded quickly, within 24hrs. They aided the student in navigating the University and placement processes and gave the student confidence to ask for what they needed to support themselves. Angela Ellis, Angela Thompson, and Katie Sayles were mentioned by name.	1	5
Negative Atmosphere	Comments in this theme centre on the pletho	ora of hoo	ps students
Towards Student	are forced to jump through to disclose, includ	• .	
Disclosure	tiring disclosures, and the negative and 'discr		
Language on Form	the infographic which frightens and angers so	ome stude	nts.
Language on Form	Comments surrounding the language on the infographic specifically related to how students would not disclose based on the language. The dialogue surrounding disclosure felt 'discriminatory', 'daunting', and 'not really worth' disclosure.	2	9
Negative Placement Experiences May Push Student off Course	Comments in this theme explained that due to students' negative experiences with disclosure or accessing accommodations on placement, students were deciding whether to continue their course due to the negative, and in some cases, discriminatory or bullying behaviour by placement staff. Students felt unsupported by the University, overwhelmed, and alone.	1	4
Placement Environment, Staff Vibes	Comments in this theme explained that students would wait a bit and get the vibe of placement staff before deciding if disclosure seemed like a safe option. If placement staff were open about their own disabilities, then students were more likely to be confident disclosing. However, students were worried about discrimination on placements if/when they disclosed.	1	2

Worried About Disclosure	Students expressed that they were worried about discrimination on placement due to disclosing a disability. In some cases, this had already happened to them, and in others, they had just watched staff treat others poorly on placement and therefore did not feel as though they could disclose	2	13
Process of Disclosure Hard	and seek support for that placement. Comments in this theme explained that the different processes for disclosure were time-consuming, labour intensive, and put the onus on the student. After such a tough disclosure process, and little to no support, students were unlikely to disclose again.	2	4
Repetitive Disclosure	Comments in this theme iterated that the repetitive process of disclosure is tiring and puts students off disclosure(s).	1	4
No Support = No Disclosure	Comments in this theme centred on the cost-benefit analysis students make when deciding whether to disclose. If they previously got support, or the process for disclosure was easy, they were more likely to disclose. However, if students received no support, or perceived that no support was likely to be available, then they would actively refrain from disclosing to anyone, including occupational health.	2	11
Onus on Students	Comments in this theme centre on students perceiving the University to place all the onus and stress on the students to inform all the organisations and individual staff to get adjustments, and then keep on top of ensuring that they receive adjustments that have been agreed. This process was onerous and time-consuming and leads many students to give up. They also explained that they would only get support if they knew it should exist and fought for it, while others said that they didn't bother.	2	23
Varied responses	Comments in this theme highlight the inconsistent nature of disclosure and access to accommodations for students at the university and trusts. Students explained that it depended on who they told, and not the organisation they told, which dictated whether the disclosure and accommodation experience was positive. Students discussed telling the same type of staff, such as	2	26

	occupational health staff, placement team		
	staff, academic staff, or disability advisors,		
	and getting a wide variety of responses		
	back.	4	2
Uni Placement	Uni placement staff took onus and put	1	3
Team - Positive	support in place for student.		
Ward Staff - Negative	Comments in this theme paint a worrying	2	15
Behaviour	picture of ward staff treating student staff		
	negatively. In some cases, where students		
	told various academic or university staff,		
	they felt the academic or university staff,		
	which should be on their side, picked the		
	trust or nursing staff's side and did not		
	protect them. This meant they would not		
	bring any issues up in future.		
General N&M issues	Comments in this theme covered students re	_	
	placements last minute, not being supernum	erary, dea	ling with
	slow bureaucratic processes for accessing ac	commoda	tions, going
	through occupational health, or appealing a C	OH decisio	n. They
	repeatedly mention staff being seen as 'too b	usy' to ass	sist students,
	and not answering student emails.		
Busy Staff	Staff are seen as too busy to assist or	2	4
	respond to student queries and concerns.		
Last Minute Placement	Students highlighted that sometimes they	1	4
Allocation	received their placements a few days out		
	and had no time to appeal or meet with the		
	trust/supervisor to get support in place.		
Not Supernumerary	Students explained that they were not	1	8
	consistently supernumerary, and that this		
	affected whether they got proficiencies		
	signed off.		
Slow process	Comments in this theme discussed that	2	10
	occupational health becomes a slow process		
	if a student discloses a disability, which		
	means some wouldn't disclose again. Others		
	explain that appealing an occupational		
	health decision, accessing support, or		
	appealing a placement allocation are all		
	very slow processes, which caused them to		
	miss out on placement hours and fall		
	behind.		
Work-Life Balance	Students complained about a lack of	1	1
	work/life balance.		
No Support	Comments in this theme show an overarching	g issue of	a lack of
support for disabled students in accessing support on placer			
	through the University. Students were left to		
	and could only access support if they had a go		
	member on their side, or if they knew about s		
		,	- 12-21-21-10-10

	keeping relationships with trusts over supporting students. This led to students		
	giving up and accepting being treated badly		
	and considering dropping the course or		
Occupational Health	taking their own lives.	s is a lack	of cloar OH
Occupational Health	Comments in this theme explained that there process for students. They were offered no si		
	needed assistance with the process. One stud		•
	staff were extremely supportive when they ca	•	
	However, another said OH staff were extrem		
	student. Others explained that the OH form is	s not strai	ghtforward
	and hard to fill out, especially as students are	n't sure w	vhat the
	consequences are for disclosing a disability.		
Lack of Clear OH	No support on review, timelines unclear	2	9
Process, No Support			
While in Review	Student detailed support gives by OU staff	1	1
Occupational Health Supportive	Student detailed support given by OH staff.	1	1
OH Form is not	Students in this theme highlighted that the	1	2
Straightforward	OH form is complicated to navigate.		_
OH Staff Negative Comments About	A student had a negative experience with	1	1
Disclosure	OH staff when disclosing.		
Recommendations by Stude	l nts		
Check-ins, Specific	Students want a specific person allocated to	2	10
Helper	help them navigate their support on the		
	changing placements. They wish to have		
	someone to check in on them and meet		
	with them face-to-face.		
Support is not	Students explained that where they were	2	9
Individually Tailored	given support by the university or on		
	placement, this support was not often individually tailored, but more, 'oh you have		
	X condition, therefore you need X support'.		
	Students want a specific advisor to work		
	with them to tailor their learning contract		
	and placement support to what will most		
	benefit them and their individual		
	circumstances. This support is also		
	requested to be individualised for		
	emergencies.	_	
Have University Reach	Students want the onus for disclosures and	2	7
out to Placements for Students	accessing accommodations taken off them.		
Students	They would like to sign a form allowing the University to liaise on their behalf.		
Trust Check-in to	A student mentioned receiving a good	2	2
Organise	practice of a video-check in with trust staff	_	
Accommodations			

	before the placement start to discuss accommodations.		
Email Confirmation	Student expressed desire to receive important emails with some form of tick if you've read box so that they could be chased up if they hadn't engaged with the email.	1	2
Ensure Placement Supervisor on shift	Students want to make sure that they are on shift when their supervisor is. They want to be introduced to this supervisor and ensure they have all three of their check-ins with this person.	1	2
Placement Reward, Event, or Party	A student expressed an interest in some form of a reward/party/event at the end of the year to look forward to celebrating getting through a tough placement.	1	1
Specific Sign off on Placement	A student mentioned a good practice they encountered where a specific ward staff went round ensuring proficiencies were signed off. This is wanted at every trust on every ward.	1	1
Student Support Group	Students expressed an interest in a disability student support group.	1	1
Study Session on Placement to Fill in MyPad/Pebble Pad	a good practice mentioned by a student was specifically allocated placement time to fill in MyPad/Pebble Pad.	1	1
Support from Uni Through OH Process	A student expressed the need for support from the university during the OH process, including where a student needed to apply for an appeal. This took the student a year, and caused a lot of undue distress, as well as financial turmoil.	1	1