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Lessons learnt from facilitating care home placements for counselling and psychotherapy students during the COVID-19 pandemic

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Abstract

Purpose: In 2021, an opportunity arose to place four counselling and psychotherapy (C&P) students in three care homes across Greater Manchester as part of a 6-week interprofessional education (IPE) care home scheme. Whilst, due to ethical concerns around confidentiality, the C&P students could not participate in interprofessional activities as intended, they still undertook their clinical placement in the home to provide accessible therapy support for care home staff. This paper aims at reporting on the varied factors that influenced the implementation of C&P student placements in care homes.

Methods: At the start and end of their placement, four C&P students were interviewed about their experiences. We draw on data from these eight interviews and two reflective vignettes: one from a C&P student and the other from the C&P programme coordinator (C&PPC).

Results: The data were thematically analysed, and two key themes and six subthemes were constructed. They broadly unpack the factors that facilitate and challenge the implementation of C&P student placements in care homes.

Conclusion: This paper highlights the value of utilising care homes as placement sites for C&P students. We propose four key recommendations for future practice: (1) it is important to establish clear lines of communication, support and collaboration; (2) a dual-space supervisory approach supports student learning in this "new" placement environment; (3) preplacement supportive frameworks are important to clarify initial role uncertainties within the care home; and (4) opportunities to provide therapy services should be well defined and referral processes put in place before the student arrives.

KEYWORDS

counselling, psychotherapy, interprofessional education, care home

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1 | INTRODUCTION: THE IMPACT OF THE COVID-19 PANDEMIC ON THE UK CARE HOME SECTOR

Following the onset of the COVID-19 pandemic in 2020, most care homes severely limited residents' contact with external visitors, including family and friends, and internal social interactions between residents and staff. Outbreaks within care homes led to periods of isolation, absences and deaths. This had a severe detrimental impact on those working and living in the care home environment (Lee, 2021). Care home managers reported being unable to provide sufficient support for their staff, or that the support that was available was not accessible for all (Giebel et al., 2022). Staff found it difficult to reinforce regulations around social contact, stating them to mirror prison-like supervision duties (Giebel et al., 2022). Some even lived in the care home to prevent the spread of the virus, constraining their ability to see their own families outside work (Lee, 2021). During this time, a call was made to address an urgent need to provide psychological support for care home staff via a plethora of support services (Giebel et al., 2022). NHS England and Improvement released its "People Plan" strategy in October 2020 (NHS, 2020). It was cited to deliver a funding package of over £15 million to provide outreach platforms and well-being and psychological training for health and social care staff who are "most vulnerable to severe trauma" (House of Commons Health and Social Committee, 2021, p. 46). Despite this, there are limited data reporting the number of care home staff to have received mental well-being support during the pandemic (Queens Nursing Institute, 2022). Critical reviews of plans to provide well-being and psychological training for staff outline how long-term support mechanisms, educational initiatives or training opportunities have not yet been integrated to support these chronic issues (British Medical Association, 2022). This context therefore clearly highlights the importance of investing in strategies that work to implement C&P services in care home environments.

2 | THE VALUE OF COUNSELLING AND PSYCHOTHERAPY SERVICES IN CARE HOMES

The merit of C&P in health care is often undervalued by the public and other healthcare professions (Klaver et al., 2019). Furthermore, C&P roles have been identified to have limited opportunities to train in a range of environments (Pachana et al., 2010), and the placing of a C&P professional within an aged care setting is rarely practised (Koder & Ferguson, 1998; Vivekananda et al., 2020). The importance of counselling services for caregivers is well-established, with skilled C&P therapists found to help carers develop interpersonal skills to reduce stress and improve their health and well-being (The British CBT & Counselling Service, 2022). However, only recently have small initiatives and studies started to examine the impact of C&P professionals in care home environments specifically (Bharucha

Implications for practice and policy

- Previous studies have identified that exposing health and social care students to care home settings is beneficial not only for students but also for care home staff as they are able to learn new knowledge and skills from each other whilst promoting collaborative working.
- The counselling and psychotherapy profession is often undervalued by other healthcare professions, and previous literature has identified that there is limited training for this role, particularly in care home environments.
- The importance of providing counselling for caregivers is highly recommended within the literature to reduce stress and improve the health and well-being of care home residents and staff. This article stresses how counselling and psychotherapy clinical placements in care home settings can only be a benefit.
- Further work is required to develop a policy framework for student placements in care homes to provide guidance, manage expectations and ensure referral processes are in place, and demonstrate a need for further research in this area.

et al., 2006; British Geriatrics Society, 2018; Pybis et al., 2021; Tegeler et al., 2020; Vivekananda et al., 2020). Pybis et al. (2021) explored the feasibility of implementing counselling services in a care home setting. Three care home managers, six care home teams and 12 counsellors were interviewed to illicit attitudes towards counselling and barriers to service implementation. The findings highlighted more work needs to be done on funding and referral processes for the provision of counselling in care homes. Similarly, Tegeler et al. (2020) found that while psychotherapy offers a potent alternative or supplement to pharmacotherapy for older adults living in care homes, there is a lack of access to psychotherapy, and residents should be screened for mental health issues more regularly. Bharucha et al. (2006) reinforce this by highlighting that talking therapies and psychotherapy can have significant short- and longterm benefits for depression, hopelessness, self-esteem, perceived control and self-expression among care home residents; nonpharmacological therapeutic approaches in this environment are rarely reported in the literature. The evidence base is therefore extremely limited, and the varied benefits C&P services can offer in care homes are yet to be fully elucidated.

3 | COUNSELLING AND PSYCHOTHERAPY STUDENT PLACEMENTS IN CARE HOMES

Importantly, no studies specifically investigate the role of C&P student placements in care homes. Care homes are a stimulating and rewarding place to work and learn (Stephens et al., 2022), yet can

have a reputation among universities as being a "last resort" placement site. Furthermore, when students are placed in this environment, certain health and social care professions are historically regarded as more appropriate, such as nursing and occupational therapy (Nursing Times, 2017). Consequently, C&P students rarely undertake placements in care homes, despite the rich opportunities this environment offers for therapeutic learning and development. **METHODS**

This paper aimed at reporting on the varied factors that influence the implementation of C&P student placements in care homes.

4.1 Setting

From October 2021 to January 2022, the University of Salford, in partnership with the University of Manchester, the University of Bolton, and Manchester Metropolitan University, implemented a 6-week interprofessional education (IPE) scheme called "Not the Last Resort" in three care homes across Greater Manchester. Interprofessional education is a collaborative pedagogical approach where students from two or more professions work together to learn from, with and about each other (Caipe, 1997).

The scheme, funded by Health Education England (2017) as part of their Clinical Placements Expansion Programme, brought together students from different health and social care professions to undertake an interprofessional placement in a care home. All students attended weekly multidisciplinary (MDT) meetings where they worked collaboratively with residents on their own health and wellness goals.

However, whilst C&P students were recruited to participate, as the project was implemented, it became apparent that the C&P students could not take part in the MDT meetings as intended, due to their professional and ethical guidelines around confidentiality. Instead of withdrawing C&P students from the care homes, it was decided that they could continue to carry out their placement outside the IPE scheme. This helped to ensure the development of a new placement environment where care home staff could access psychological therapeutic support.

4.2 **Participants**

C&P students who were in their second and third year of study were offered the chance to undertake the IPE placement in a care home via advertisements posted on the University of Salford's virtual learning portal. Four students volunteered, and all agreed to be part of the evaluation, along with the C&P programme coordinator. All five participants provided informed consent.

4.3 Data collection methods

This article reports on one component of our broader mixed methods pilot study. It draws specifically from data collected via interviews with the four C&P students involved in the IPE scheme and two reflective vignettes: one from a C&P student (Figure 1) and the other from the C&P programme coordinator (C&PPC) (Figure 2). These data were not included in our report (Stephens et al., 2022) or paper that reported on the initiative (Stephens et al., 2022), given that C&P students were excluded from IPE activities.

Analysis

The data were analysed thematically. Thematic analysis is a widely used method of identifying and analysing patterns of meaning in a data set (Braun & Clarke, 2020). An inductive approach to analysis was employed. The researchers read, reread and coded the data, and themes were conceptualised based on the data itself and interpretively shaped throughout by the researchers' own social and cultural positionings.

Ethics

Ethical approval was sought and granted by the University of Salford's Ethics Committee. Written consent was obtained prior to each interview, and participants were assured their involvement was voluntary throughout.

The two reflective vignettes

Vignette one: I originally applied to work at a care home in Wigan, Greater Manchester, as part of an IPE team, to gain experience of working with other departments within health care. It sounded like an exciting opportunity as I had never heard of a counsellor being placed within a care home setting. The idea was for one resident to be seen by every team member and for a weekly meeting to take place.

This sort of work instantly became a problem for me as a counsellor as we were expected to work closely with care home staff, residents and then explore the case with the rest of the team. All of which would have brought up many ethical issues for me as a counsellor, as it would have breached confidentiality and would have blurred boundaries between staff/residents and myself. After much deliberation between my university and the IPE research team, it was decided that I would still be placed within the care home, but not as part of the IPE team.

I was grateful that I was still able to offer my counselling skills to the staff within the care home, as I was aware of how much support they needed.



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I couldn't imagine how difficult times had been during the pandemic for the care staff and their residents, as according to media it seemed that many care homes were left to their own devices and most forgotten during the pandemic- which was an awful thought to me, as most residents in care homes are vulnerable and elderly so would have been at most risk.

I always had a soft spot for care homes as my Mum was a carer and I knew how much she loved her job and the residents she worked with. When the opportunity came to support people like my Mum, I jumped at the chance. I know she would have been on the frontline doing all she could during the pandemic for the residents that she supported, and this was my way of doing my part too -almost.

It became clear when I walked into the care home that I was walking into a family, the bonds between the staff and the residents were evident. I could see how supported the residents were, but wondered who (apart from their wonderful managers) was supporting the staff? I was welcomed with open arms into the care home and was immediately given a handful of clients. All of whom it felt like, had been waiting for that safe and judgement free space, that we as counsellors aim to provide. The staff had been pushed to their limits during the pandemic and I was happy to be that person that was there for them to offload their feelings to and to offer the emotional support they needed.

Unfortunately, as fate would have it, I was only able to support the staff for a few weeks as the pandemic hit again, causing the care home into full lockdown. I felt awful about this as I had begun to develop good therapeutic relationships with my clients and felt I was unable to help at a time when that extra emotional support would have been incredibly beneficial.

FIGURE 1 Vignette from C&P student.

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FIGURE 2 Vignette from the C&PPC.

My role as the Placement co-ordinator and Placement Lead for the BSc in Counselling and Psychotherapy is to source placements for students which not only provides an opportunity to obtain their 100 hours of professional practice, but to enable them to engage in enriching placement experiences which develops both their professional skills and to obtain a deeper understanding of many of the existential difficulties that clients coming to counselling experience as a result of the various challenges and demands and particularly those in residential care face today.

The ageing population and those who have been placed in care homes, possibly as a result of developing mental health issues or cognitive decline has been a particular interest and curiosity to myself as to how and why there is a minimal presence and uptake of counsellors and psychotherapists engaging with care homes. To my knowledge that there have been no student placement opportunities prior to the IPE project within our placement programme.

The beginners mind of student counsellors, who often begin their professional practice with a strong existential openness and a passionate belief in the model of Person-Centred counselling, seemed very well placed to engage with an ageing client group in residential care. Due to the energy and vibrancy that student counsellors can often bring to their practice and their highly committed interest and attention to their clients and the counsellors use of the core-conditions, this could have a positive therapeutic impact for both the client and counsellor and I was keenly interested in the relational phenomenon, that may arise for both client and counsellor who occupy an existence in the world from very different ends of the ageing spectrum.

Ultimately, I also hoped that the student's presence within the care organisation may have a wider positive impact to the residential organisation and the wider professions contributing as part of this project in providing additional understanding as to the valuable contributions that counselling, and psychotherapy can bring not just to their client group but also to the organisation and wider helping professions.

As part of the students counselling placement experience, all the students are offered 1-1 and group supervision from their training provider at the University of Salford and this forms an important part of the students developing awareness and understanding of their professional skills, which I feel is a vital part not just of ensuring safety and best practice for the clients, but also ensuring that the student counsellors had dual spaces to process and reflect upon the wider field of their work within the organisations and their experience of the IPE project.

Ultimately, I firmly hoped that the students undertaking placements in the care homes would obtain invaluable humanistic knowledge from both their contact with their clients, whom undoubtedly have faced many challenges due to the Pandemic and also the additional health care services which form a vital part of the wider support and care for the residents in these particular spaces.

I feel that this project has been a privileged opportunity for student counsellors to almost look behind the curtain at some of the unspoken experiences of clients in residential care in today's societal climate and opened a pathway for future counselling services to potential form a part of the services within residential care.

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Vignette two: My role as the placement coordinator and placement lead for the BSc in C&P is to source placements for students that not only provide an opportunity to obtain their 100 hr of professional practice but also enable them to engage in enriching placement experiences that develop both their professional skills and to obtain a deeper understanding of many of the existential difficulties that clients coming to counselling experience as a result of the various challenges and demands, and particularly those in residential care, face today.

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5 | FINDINGS

Two themes and six subthemes were generated from the data. They broadly explore the factors that facilitate and complicate the implementation of C&P student placements in care homes (see Table 1 for more detail).

5.1 | Theme 1: Facilitators

5.1.1 | Motivation and value

Students were motivated and enthusiastic about their care home placement from the start. Preplacement, they reported that they were "interested to see what kind of work" (Student 1) they would be doing, stating that they were "just quite intrigued" (Student 4) and wanted "to gain experience in a different kind of setting" (Student 4). The students thought that completing their required placement hours in a care home setting "sounded like an exciting opportunity" (C&P student: vignette), as they "had never heard of a counsellor being placed within a care home setting" (C&P student: vignette). Often, they emphasised how "grateful" they were to be offered the chance to develop their skill sets in this environment. They also had specific preconceptions regarding their broader value in this environment and voiced a keenness to work with different groups. The importance of being able to provide a service to the care home staff was stressed, as they were "aware of how much support they [care

TABLE 1 Overview of themes.

Theme 1: Faci	litators	Subtheme 1: Motivation and value
		Subtheme 2: Learning and supervision
		Subtheme 3: Providing accessible support
Theme 2: Challenges	hallenges	Subtheme 1: Supportive framework
		Subtheme 2: Role clarification
		Subtheme 3: Placement hours

home staff] needed" (C&P student: vignette). They also detailed how beneficial they felt their role could be for friends and family members of the residents: "families seeing, like, their parents and loved ones in a care home and really ill, it is quite difficult...providing that support for them is beneficial" (Student 4). Students also explained that this person-centred therapy was "very well suited" (Student 1) for residents, not only because they would benefit from it but also because "the process unfolds over time, however many sessions it needs" (Student 1), which suited their practice environment being the residents' full-time accommodation.

5.1.2 | Learning and supervision

Students reported that they learned a lot by undertaking their placement in a care home. One student, for instance, described the "invaluable" knowledge they gained "from their contact with their clients" (Student 1). It was recognised to also offer opportunities for students to learn about the roles of other professions within health and social care, as well as "the running of care homes" (Student 1). Students reflected that they were "not used to working with many professionals" and that the experience of working in this environment allowed them "to understand aspects of other people's working and what their roles kind of bring" (Student 4). Importantly, their ability to learn effectively was understood to be directly informed by the dual-space supervisory approach utilised. As part of the students' counselling placement experience, the students were offered group and 1-1 supervision from the University C&P programme team, which was recognised to enable the students to develop an awareness and understanding of their professional skills. From the programme coordinator's perspective, this was a "vital part not just of ensuring safety and best practice for the clients, but also ensuring that the student counsellors had dual spaces to process and reflect upon the wider field of their work within the organisations and their experience of the project" (C&PPC: vignette).

5.1.3 | Providing accessible support

Although students envisioned working with residents, their role in the homes was solely focussed on supporting the staff. Care homes all voiced this preference in their initial meetings with the students as they had tried unsuccessfully to access counselling services during the pandemic. As one student said: "It became clear when I walked into the care home that I was walking into a family, the bonds between the staff and the residents was evident. I could see how supported the residents were, but wondered who (apart from their wonderful managers) was supporting the staff?" (C&P student: vignette). Working with the staff was thus a crucial element of the students' experience, and it allowed them to support a group who have little access to such services. "It felt like they (staff) had been waiting for that safe and judgement-free

space, that we as counsellors aim to provide" (C&P student: vignette). Although they were, at times, disappointed that they could not work with the residents or their families, and worried about this "last minute" shift in their purpose, students recognised that providing therapy support was meaningful for the staff, especially given that it was within the working environment itself as this could make care home staff "feel a bit safer" (Student 2) and ensure it was convenient, so staff were "not having to come out of work and travel to go somewhere" (Student 4). The students took joy from how this demonstrated how important counselling services are and how they could potentially "be set up in the future of care homes," especially as the "waiting list for counselling services is extremely long" (Student 4).

5.2 | Theme 2: Challenges

5.2.1 | Supportive framework

Despite the students' enthusiasm to provide C&P services in care homes, one student did emphasise the importance of developing a more supportive preplacement framework to support their involvement in this environment. It was stated that the experience was initially "a bit intimidating" (Student 2), especially as none of the students had previously visited a care home. This sense of unease also related to the knowledge that their placement experience was part of a pilot scheme—"I know I am the first one (counsellor)" (Student 1). Furthermore, discomfort was often also linked to a lack of placement opportunities the students had experienced in the context of the pandemic, and whilst a tripartite agreement—and induction meetings—between the student, care home manager and supervisor had been organised, their lived experience was still often one of uncertainty at the start of their involvement.

5.2.2 | Role clarification

"...gaps in communication" was also identified as a key challenge. Students often described the whole care home placement as "a bit hectic" (Student 2), or a less clinical environment than they had imagined, which emphasised how the care home was a different and unknown territory for the students. Students voiced that, to combat these challenges, "it would be good if it could be made clear to everyone what their [C&P] part is in the very beginning" (Student 1) to establish the care home staff's "expectations" (Student 1). At the start of their placement, some students expressed that they were worried the care home staff were not used to having counselling services and did not fully understand their specific therapeutic approach. For example, Student 2 stressed the importance of creating an initial "counselling sales pitch" (Student 2) to prove to the wider care home team that the work they do is "relevant to what we're all collectively working on," and thus avoid being thought of as an "extra pair of hands around the care home who



would occasionally do counselling" (Student 2). Role uncertainties were less common for those who had accumulated more placement hours, however. Student 4 stated that they did not feel concerned around communicating their purpose there, rather that they were confident to assert that it was simply "to give them [care home staff] that place where they can just let everything out" (Student 4).

5.2.3 | Placement hours

The students often spoke of their concerns to ensure they completed their placement hours: "Completing placement hours are definitely a big thing" (Student 1). They frequently felt the pressure of not achieving the 200 hr required, with one student citing their main concern as being: "basically not getting my hours" (Student 4). Being placed in a care home with a small number of paid staff meant some students felt that they "did not have any guarantee that, by the time the end of the IPE programme is finished, I [the students] will have a single client" (Student 1). Others were similarly concerned regarding "people not turning up" (Student 4) given that the staff were often busy. Notably, for one student, these worries were quickly dispersed when they were "welcomed with open arms into the care home and was immediately given a handful of clients" (C&P student: vignette).

6 | DISCUSSION

Current evidence has identified that the provision of well-being support for care home staff is limited and difficult to access. Whilst there have been a few small-scale studies regarding the merit of C&P provision in care home environments, it remains an underresearched topic. This is important to address, particularly in the climate of COVID-19. Our pilot study sought to examine the impact of an interprofessional training care home scheme. Whilst C&P students could not engage in IPE activities, we recognised how important it was to support them to complete their placements in the care home environment regardless. This aim of this paper was therefore to report on the varied lessons learned when implementing C&P student placements in care homes.

Our findings reinforce arguments that C&P students can offer a valuable role in the delivery of person-centred care in care homes (British Geriatrics Society, 2018; Pybis et al., 2021). The care home environment being a place of residence required "whole person" care (Lauckner et al., 2018) which resonates with the philosophy of C&P and thus spoke to its suitability as a placement site for C&P students. The students' and placement coordinator's immediate enthusiasm to experience a placement in a new environment was a driving force behind their successful involvement in our study, which establishes the different levels of investment required. Placements in care homes are still considered limited and are rarely practised for C&P students (Koder & Ferguson, 1998; Vivekananda et al., 2020), and a key facilitator to implement them is thus a willingness and

open-mindedness from all involved to challenge and break down long-established placement traditions.

The students involved reported learning a lot from their time on placement and felt the experience supported their readiness for work after graduation. Importantly, their ability to learn effectively was informed by the dual-space supervisory model utilised by the university. Well-designed supervision promotes reflection (Pasyk et al., 2022) and, in this instance, it was crucial that students had these space(s) to deepen their understanding of their roles, responsibilities and acknowledge the accompanying emotionality resulting from their work.

During their time on placement, students provided accessible support for care home staff, and their role was deeply valued in how they could offer "in house" therapy among a group who were keen to access such services, especially in the context of COVID-19. However, where students and the placement coordinator initially envisioned their role as being centred around the residents, in the field, staff sought to utilise the service themselves. Whilst students valued their work with staff, this "last minute" shift could generate a sense of uncertainty, which speaks to (1) a necessity to carefully manage perceptions and expectations across all those involved and (2) the importance of establishing lines of communication, support and collaboration between the homes and university C&P teams to enhance the placement experience for both educators and students (Bell et al., 2014).

We also establish that students can have heightened concerns about their role in this environment, especially when they have not previously worked in, or visited, a care home. For some students, often those who had completed fewer placement hours prior to their involvement, the care home environment was different than they had imagined, and they had concerns about their integration into this environment (Galletta et al., 2017). Further work is therefore required to develop preplacement supportive frameworks for C&P student placements that provide guidance about their role within that specific care home environment.

The completion of placement hours also featured heavily as a challenge or barrier to engagement, which resonates with wider literature identifying this as a key source of anxiety among students (Kumary & Baker, 2008; Pelden & Banham, 2020, p. 3). In this context, students were required to complete 100 hr of supervised practice for entry to the profession (British Association for Counselling and Psychotherapy, 2022), and the care home environment itself was understood to generate feelings of uncertainty about the possibility of this (given small numbers of staff and their capacity to attend regular sessions). We therefore stress the importance of taking the time to prepare care homes effectively, so that opportunities to provide therapy services are well-defined and referral processes are in place before the student arrives.

Overall, it is hoped that this paper illuminates the beneficial role C&P students can have in care home environments and unpacks some of the underpinning factors that influence the successful implementation of their placement. As strategies to provide accessible mental health support need to be made more available for care home staff, residents and their families (Giebel et al., 2022), the provision

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of student placements within care homes can assist to both alleviate this issue and create pathways for future C&P practice in the system. Given the small-scale nature of this project, further research is urgently needed to extend the current findings (Pybis et al., 2021).

7 | CONCLUSION

Prioritising the mental health and well-being of staff within care homes has been an ongoing issue, heightened by the recent COVID-19 pandemic. An opportunity arose to place four C&P students into three care homes across Greater Manchester as part of an IPE training scheme. As the project was implemented, it became apparent that whilst the C&P students could not participate in the MDT meetings, they could still provide accessible and valuable therapy support to the staff. Our work highlights that there are specific facilitators and barriers to C&P students undertaking a placement in the care home environment. In exploring these, we offer four key recommendations for future practice: (1) it is important to establish clear lines of communication, support and collaboration between the homes and university C&P teams to enhance the placement experience; (2) a dual-space supervisory approach supports students learning in this "new" placement environment; (3) preplacement supportive frameworks could help to clarify initial role uncertainties within the care home environment; and (4) opportunities to provide therapy services need to be well-defined and referral processes put in place before the student arrives.

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CONFLICT OF INTEREST

The authors report no conflicts of interest. The authors alone are responsible for the writing and content of the paper.

DATA AVAILABILITY STATEMENT

The data are not available due to ethical and legal restrictions. Due to the nature of this research, participants of this study did not agree for their data to be shared publicly, so supporting data are not available.

ETHICS STATEMENT

Ethics was granted by the University of Salford's Ethics Committee.

CONSENT STATEMENT

We will produce reports about the success of the placement project. The results of this study may also be published in academic journals or presented at conferences and workshops. If you would like a copy of the final report, please inform the researcher.

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REFERENCES

- Bell, J., Cox, D., & Marcangelo, C. (2014). Master's level occupational therapy students on placement: an exploration of perceptions and expectations. *British Journal of Occupational Therapy*, 77(4), 181–188
- Bharucha, A. J., Dew, M. A., Miller, M. D., Borson, S., & Reynolds, C. (2006). Psychotherapy in long-term care: A review. *Journal of the American Medical Directors Association.*, 7(9), 568–580. https://doi.org/10.1016/j.jamda.2006.08.003
- Braun, V., & Clarke, V. (2020). One size fits all? What counts as quality practice in (reflexive) thematic analysis? *Qualitative Research In Psychology.*, 18, 328–352. https://doi.org/10.1080/14780887.2020.1769238
- British Association of Counselling and Psychotherapy. (2022).

 Coronavirus and students. Guidance for members. https://www.bacp.co.uk/news/news-from-bacp/coronavirus/coronavirusands tudents/#:~:text=Placement%20hours&text=The%20current%20 100%20hours%20supervised,extension%20or%20mitigating%20 circumstances%20policy
- British Geriatrics Society. (2018). Depression among older people living in care homes report. https://www.bgs.org.uk/resources/depression-among-olderpeople-living-in-care-homes-report
- British Medical Association. (2022). BMA commentary on the NHS People Plan 2020/21. https://www.bma.org.uk/advice-and-support/nhs-delivery-andworkforce/workforce/bma-commentary-on-the-nhs-people-plan-202021
- Caipe, C. (1997). Interprofessional education a definition. CAiPE Bulletin. 13(9), 1.
- Galletta, M., Portoghese, I., Aviles Gonzales, C. I., Melis, P., Marcias, G., Campagna, M., Minerba, L., & Sardu, C. (2017). Lack of respect, role uncertainty and satisfaction with clinical practice among nursing students: the moderating role of supportive staff. *Acta bio-medica: Atenei Parmensis*, 88(3S), 43–50.
- Giebel, C., Hanna, K., Marlow, P., Cannon, J., Tetlow, H., Shenton, J., Faulker, T., Rajagopal, M., Mason, S., & Gabbay, M. (2022). Guilt, tears and burnout—Impact of UK care home restrictions on the mental well-being of staff, families and residents. *Journal of Advanced Nursing*, 78, 1–12. https://doi.org/10.1111/jan.15181
- House of Commons Health and Social Committee. (2021). Workforce burnout and resilience in the NHS and social care. Report. House of Commons. https://committees.parliament.uk/publications/6158/documents/68766/default/
- Klaver, E., Davis, N., Greidanus, E., Harris, G., & Whelton, W. (2019). Attitudes towards interprofessional education among counselling psychology graduate students in Canada. Canadian Journal of Counselling and Psychotherapy, 53(4), 307–329.
- Koder, D. A., & Ferguson, S. (1998). The status of geropsychology in Australia: Exploring why Australian psychologists are not working with elderly clients. Australian Psychologist, 33(2), 96–100. https:// doi.org/10.1080/00050069808257388
- Kumary, A., & Baker, M. (2008). Stresses reported by UK trainee counselling psychologists. Counselling Psychology Quarterly, 21(1), 19–28.
- Lauckner, H. M., Rak, C. N., Hickey, E. M., Isenor, J. E., & Godden-Webster, A. (2018). Interporfessional and collaborative care planning activities for students and staff within an academic nursing home. *Journal of Interprofessional Education & Practice*, 13, 1-4. https://doi.org/10.1016/j.xjep.2018.07.005
- Lee, K. (2021). Mental health and wellbeing of care home residents and staff: a snapshot of COVID-19 impacts and responses. https://

- covidandsociety.com/addressingmental-health-wellbeing-care-home-residents-staff-impacts-responses/
- NHS. (2020). NHS strengthens mental health support for staff. https://www.england.nhs.uk/2020/10/strengthening-mental-health-support-for-staff/
- Nursing Times. (2017). Care homes should be viewed as a positive placement for students. https://www.nursingtimes.net/news/education/care-homes-should-beviewed-as-positive-placements-for-students-25-04-2017/
- Pachana, N. A., Emery, E., Konnert, C. A., Woodhead, E., & Edelstein, B. A. (2010). Geropsychology content in clinical training programs: A comparison of Australian, Canadian and U.S. data. *International Psychogeriatrics*, 22(6), 909–918. https://doi.org/10.1017/S1041610210000803
- Pasyk, V. S., Glazer, M., West, A., Campbell, A., & Kassan, A. (2022). Growth during a global pandemic: A polyethnography among doctoral counselling psychology students. *Training and Education in Professional Psychology*, 16(1), 95.
- Pelden, S., & Banham, V. (2020). Counselling placements caught up in the mismatch of standards and realities: Lessons from COVID-19. Journal of University Teaching & Learning Practice, 17(4), 12-152.
- Pybis, J., Chigariro, N., & Bacon, J. (2021). 462 counselling in care homes. Age and Ageing, 50(2), ii1-ii4. https://doi.org/10.1093/ageing/afab1 17.06
- Queens Nursing Institute. (2022). The Experience of Care Home Staff During Covid-19 a Survey Report by the QNI's International Community Nursing Observatory. https://www.qni.org.uk/wpcontent/uploads/2020/08/The-Experience-of-Care-Home-Staff-DuringCovid-19-2.pdf
- Seaman, K., Saunders, R., Williams, E., Harrup-Gregory, J., Loffler, H., & Lake, F. (2017). An examination of students' perceptions of their interprofessional placements in residential aged care. *Journal of Interprofessional Care*, 31(2), 147–153.
- Stephens, M., Kelly, S. A., Clark, A. J., Granat, M. H., Garbutt, R. S., & Hubbard, L. (2022). Not the last resort: The impact of an interprofessional training care home on residents, care home staff, and students. Project Report. University of Salford.
- Tegeler, C., Beyer, A. K., Hoppmann, F., Ludwig, V., & Kessler, E. M. (2020). Current state of research on psychotherapy for home-living vulnerable older adults with depression. Zeitschrift für Gerontologie Und Geriatrie, 53, 721–727.
- The British CBT & Counselling Service. (2022). Counselling for Carers. thebritishcbtcounsellingservice.com
- Vivekananda, K., McNamara, N., Chan, P., Ma, C., & Spinks, C. (2020). Australian psychologists' perceptions on their role in end-of-life care of older adults. Australian Psychologist, 55(6), 715-728.

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