

Podcast transcript

Career conversations: Lorraine Allchurch

Hannah Spencer:

Hi everyone and welcome to this podcast recorded and produced by the Royal College of Occupational Therapists.

This is one of a series of podcasts which really focus on hearing and sharing the career narratives of our diverse workforce and highlight a whole range of possibilities in occupational therapy.

My name is Hannah Spencer and I'm an occupational therapist that's had the absolute pleasure and privilege of facilitating and capturing these conversations with members of our occupational therapy community.

I'm here today with a member of our very much valued support workforce.

Lorraine Allchurch:

Thanks, Hannah. Yeah. My name is Lorraine Allchurch and I am the lead AHP support worker here at the Dudley Group. My background is a clinical assistant therapy practitioner in frailty, AMU and ED and I also work in a blended role in that role across occupational therapy and physiotherapy.

Hannah:

Gosh, you're a busy lady. For those that don't know AMU we're referring to...?

Lorraine:

Acute medical unit

Hannah:

...and ED is emergency department?

Lorraine:

Yes.

Hannah:

Brilliant. Thank you. Just make sure, yeah. So the purpose of today's conversation is around career journeys, thinking about your career, your experience in getting to this point. So what drew you to occupational therapy or allied health? Can you pinpoint kind of the source of that? How did it start?

Lorraine:

It wasn't planned. It started because I wanted to look for progression and I didn't want to go down

the university route. So I was an auxiliary nurse in a daycase unit, which I loved, at the University Hospital Birmingham, but the only options for progression was to go down that registered route and I'd got a young family and that really wasn't for me at that time. So I looked to see what progression options there were and found AHP roles, therapy assistants. So I applied to the Dudley Group and started here as a therapy assistant. And then as that role started, it started as a blended role. So it was across occupational therapy and physiotherapy, which was just brilliant for me because I learnt two professions in one.

Hannah:

Brill, so you came from a nursing role into an AHP role?

Lorraine:

Yeah.

Hannah:

And what contributed to the flow along your way? What skills, experiences, opportunities have contributed along the way?

Lorraine:

Working with some really good clinicians that wanted to share their knowledge. I think working with people that want you to be the best you can be, the registered staff need us to be their eyes and ears when we're with the patient, so I learned from them a lot and because I was always eager to learn, they invested in me as well. I think it's that two way process, isn't it? If you want to learn from somebody else, then they're going to invest in you. So I had really good mentors, really good people that trusted me and I trusted them.

Hannah:

Have you been doing it long?

Lorraine:

Yes, I've been at the Dudley Group for 17 years now, but in a leadership role for two years. So I've got about 15 years clinical experience as a support worker before I went into leadership, but I was leading before that, but just didn't know I was leading.

Hannah:

Can you tell us a bit more about that?

Lorraine:

Yeah, I think when I say I was leading before that, I was very much always wanting to push the boundaries of what support workers could do. Very much not wanting to go about above my scope, but always wanted to expand the scope into what support workers could do. And especially when we got clinical challenges, the team was really under pressure, it was, what can I do to help? What am I able to do? And very much extended my scope because I've got leaders that I went back to. So you extend your scope, you're doing something that you may not have done before, but you've got that support of your seniors. They might be at the end of the phone, they might be on the next

ward, but you know that you've got their support and guidance to be able to help you extend that scope. So that was how I kind of always was the leader in that way.

Hannah:

What do you love about your role both in the present day and over the course of your journey? What have been the joys?

Lorraine:

The autonomy with our patients, I think, is absolutely the highlight. Making a difference to somebody when they're at their absolute crisis point, perhaps when they're in ED and they've been struggling at home for such a long time and we can come along and make a difference to that person. And it might be with such, to us, a simple thing that we're implementing into that person's journey, but to them it's going to be really making a huge difference and an impact and can often be the difference between them staying in hospital or going home. So I think that to me is the most rewarding thing. Making sure that somebody can go home safe with the support that they need and they don't need a hospital admission is one of the most rewarding things that I've found in my career. And actually doing that as a support worker as well, working in that environment, it's really challenging, but having the skills, the confidence and the mentors to be able to get us to be working at that level is very rewarding.

Hannah:

Fast paced, I imagine, as well.

Lorraine:

Yeah, you do have to be really fast paced, you have to think on your feet. Problem solving skills are key, but that's what our patients want from us, isn't it? They need their problem solved and that's what we're really good at because we've got all the tools to be able to do that for them and we've not got the emotional attachment that they're in that crisis point. So we're that calm person that can see the wood for the trees for them. So I think definitely the highlights are supporting people and our patients when they need us most, but also supporting our colleagues as well. Working in a team for a very long time, you get to know the workings of that team. You get to know all the ins and outs of it. So when we have rotational new band five come in and they're brand new, working in a really fast paced, stressed environment, they come to the support worker, they come and ask us the questions and being able to support them and guide them is really rewarding. And also with students as well, we'll get asked the questions that they don't want to ask the educator. We'll get asked those "silly questions". There is no silly question but they won't want to ask them in front of the registered practitioners. They're going to come and find us. And that's really special. And it's only as you go more in your career that you realise how important that is to be able to support somebody when they've got a question that they don't really want to ask somebody else. Because we've all been there. Absolutely. And be that trusted person as well. Yeah. You also have to be brave. I've had times where I have to set my boundaries, what was within my scope, and actually sometimes say, you need to take that to your educator, you need to take that to your supervisor. Because I can only help within my scope, within my role. So you have to be firm as well of your boundaries. We are still support workers.

Hannah:

What about boulders and challenges along the way in the present day and over the course of your journey, what have been the biggest challenges?

Lorraine:

Myself is my biggest challenge, I think, holding myself back. I think once you realize that you can achieve and you're not bound by a title or you're not bound by a banding, then it opens up a lot more doors. I think once you've got the confidence to knock on the door and open it, there is a lot of opportunities, but it's having the confidence to do that. It's having the confidence and the people around you to help you open those doors.

Hannah:

So I think, next question, what helps or would have helped?

Lorraine:

Definitely nobody came and handed things to me on a plate. It was me going out and finding things and saying, I'd really like to do this. I'd really like the opportunity to go to this perhaps study event or go to this network to see what I can find out, what is available for support workers. So it's me that has to do the hard work, but I've got to also convince my either supervisors or managers that it's relevant to my role, it's relevant to my practice and it's relevant to the team and the work that I'm doing. That's really important, I think having the confidence to do those things, not everybody does. It's really difficult as a support worker to find those opportunities. If you don't know where to look. And I think as registered staff, they also don't know where to sign post you. And if you don't know what you're looking for, where do you start? So for me, I knew I didn't want to go down the registered route, but I still wanted development, I still wanted opportunities. And I didn't think that having a registration or not having a registration should stop me from doing that. So I looked outside of our organisation and I went an associate member of the Chartered Society of Physiotherapy. And that was where I looked for opportunities and got myself onto various committees and study events for associates, which connected me with like minded people.

Hannah:

I've heard frequently kind of having these conversations. People want to see possibilities because almost don't know what's possible without seeing it.

Lorraine:

Yeah, definitely. So the first meeting I went to with the Chartered Society of Physiotherapy was to talk about what the associate member membership can look like, what do associate members want? And in that room there was two associate members. There was one was a band five non-registered, and one was a band six non-registered. Working clinically, I didn't know how I was going to get there. I didn't know how I was going to convince anybody that this is possible. But hearing that drives you to be able to take opportunities along the way.

Hannah:

Seeing the role models around you then?

Lorraine:

Definitely. Definitely.

Hannah:

How has your environment around you enabled or restricted your career journey?

Lorraine:

I think in the early days, restriction was because you didn't know what was available, so you just felt that you were either going to be a support worker or you were going to be a registered practitioner. And I think a lot of support workers feel like that that's their only option. But actually, from talking to support workers, they love being a support worker, they love the autonomy within their role. And actually they want to grow and develop and be the best they can be within that role. So once you realise that, once you realise that there's opportunities as a support worker that we can contribute to this profession just as much as registered practitioners and our voice does matter, then that does open up a lot more opportunities because we can contribute just as much as a registered practitioners to our profession.

Hannah:

What about your experiences of supervision?

Lorraine:

I've had very, very positive experiences of supervision and I've reflected on many years of supervision still now, because that was where I was taught reflection. I think in the early days, I often looked at our registered colleagues and thought, I haven't got the kind of theory, I haven't got the degree, I haven't got all that knowledge that they've got, but I've got a lot of practical skills. So within my supervision, I was able to develop new skills and develop that reflective practice, which I feel has definitely benefited my clinical and non clinical development, but what I would say is I brought a lot to my supervision as well, so I didn't go empty handed. It was a two way process and I didn't go expecting somebody to bring things to me. It was I brought either situations, reflections, I brought things that I wanted to discuss, how things were going well, how things were not going well, and how could I be better at solving those problems myself. And it was a safe space to do it.

Hannah:

Do you feel that you've been able to be or bring your best self to your role?

Lorraine:

Definitely in my clinical work, I'd absolutely no kind of barriers there because you're there for the patient, so you absolutely do your utmost to do everything you can in your power to support that patient's journey and recovery. Truthfully, I think in leadership, it's taken me a little bit of time to be a bit more confident, to come out and put my head above the parapet and be a bit more vocal and honest about it, even though deep down I knew that it was a goal and it was where I was working towards having the confidence. To say it out loud is a bit different, isn't it? So it would perhaps be a little bit more private in my early career, earlier in my journey, my supervisors knew, and it might have been in my appraisal, but I wouldn't have discussed it further than that because it's having the confidence. You don't want to fail, you don't know how you're going to get there, so you're not going to tell anybody because I might not get there. But now it's different because you've got that confidence and you've got that network around you that the doors are open, so you're a little bit more vulnerable, but that's fine. And it's actually, when you look at other leaders, vulnerability is one of the best things in the leader. I think the great leaders that we have, either in our professions or out of our professions, are the ones that are honest with us and they don't always have the

answers. And that's okay, we don't have to be perfect, we just have to try to do the best we can.

Hannah:

Can you tell us a bit more about your leadership role?

Lorraine:

I started leading and didn't know I was leading because I wanted to make a difference to the profession, I wanted to make a difference to development opportunities. And so it was a very unplanned career move for me. But once I realised that I could make a difference to the profession and my voice did matter and actually I was welcomed into many different arenas to share my voice, leadership became a lot more viable. So it actually made me think, then I can make a difference for others. So it's not just developing myself, this is actually now developing a workforce so I can create opportunities for people that just like me, didn't know where to start, didn't know where to look and be that role model and say to them, I'm just the same as you, I'm that support worker. They didn't know where to go, didn't know what to look. And actually, we can come on this journey together, so it's hearing those stories that will inspire others. For me, that's what leadership is about. Yes, we've got work to do, we actually have to evaluate the impact of our role and what are we actually doing to develop others and whether that's down a formal education route or whether we've got other projects that we're working on. But ultimately, it's about being that role model for others. Support workers, knowing that they've got somebody that's got their back, somebody that's shouting for them. It's not just about the registered workforce. We need the registered workforce. Absolutely. There's a crisis in the NHS, I'm not dismissing it, but we also need to bring the support workforce with us.

Hannah:

Absolutely. And people stay where they're valued, don't they? Where they're able to be nurtured and supported and developed to be their best selves.

Lorraine:

Absolutely. Definitely. And there will be some people that there's lots of pipelines into the registered route and support workforce is absolutely one of those ways. And there will be a proportion of people that want to go down that route, but there will also be people that are more than happy to stay support worker, but they can be the best support worker and how do we get them to be the best support worker? And that's about making them feel valued, their contribution matters, their work matters, and they need time and space to do that.

Hannah:

Have there been points where your journey, your river as a career journey, has turned or changed course in a way that you'd not anticipated?

Lorraine:

Absolutely, yes. And that was because at some point you felt that your only option was to go down the registered route. And for me, at the point I was in my life with a young family and home commitments that wasn't viable for me, and also the financial impacts of going off to university, there wasn't degree apprenticeships around many years ago, so it was a big financial step to take. So it felt like, that's my only route, I can't do that, so what am I going to do? But now, certainly with the AHP competency and career education framework, leadership is actually an option and leading

support workers is an option. And I think it's almost going to be an unanticipated additional career route for people, because this workforce is going to grow and it's going to need the leaders within it and who better to lead our support workforce than a support worker who's got that lived experience?

Hannah:

What's been most important or helpful in your development and progression as a member of our support workforce?

Lorraine:

Leaders around you, the people that believe in you, the people that will support you having those safe conversations that is definitely really important. People that want to take the risk, the people that can see something in you and know that you're more than you are, more than you can be when you don't even see it yourself. Imposter syndrome is real and many leaders will talk about that because somebody else has seen something in them that they haven't seen and that is definitely part of my journey.

Hannah:

What about professional identity? How would you perceive your professional identity?

Lorraine:

It's changed, I think. Yeah, definitely because I aligned myself to a governing body where I'd got connection and actually was part of that workforce. But actually now the support worker identity is just as important and actually we need to be inspiration for the unregistered workforce. And I think your identity as a support worker is just as important as the profession that you're working alongside.

Hannah:

What do you wish you'd known prior to joining the support workforce? What would you say now to your early career or your younger self?

Lorraine:

I would say that to stop comparing myself or feeling undervalued that I've not got a registration or a pin number to make a difference. That absolutely we do make a difference. And that was me, that was what I felt I needed to progress to make a difference, not the people that I worked with. I felt that I needed that higher level of education to be able to make a difference. And actually that's about your scope of practice and your role and very different responsibilities as a support worker. We can still make a difference to the profession and the role within our own scope of practice. So I think once you realise that I would have perhaps, maybe not, I may have got there sooner, I don't know, maybe those boulders along the way made me where I am.

Hannah:

What's next for you?

Lorraine:

I want to continue on the journey. I think I want to definitely continue to influence as much as I can

and that's influencing support workers, but also influencing the registered practitioners along the way that there's more to what the support worker can do and how we can grow and expand that. I think definitely the networks that you build and the stories that you hear drive you and I think that's what we need to get out more of those stories. There's many support workers that have had struggles along the way. They've had the knockbacks and it's getting up... what drives you to get up again and try something new? That door closed, you've got another door to go through. What is it that makes you get up and go through that next door? And you know what? I've spoken to three people this week that are at the point where they're applying to go to university to do OT, but they're stopping it as in, they're pausing... do I do it? Don't I do it? Because they love being a support worker and they feel that their only option for progression is to go down that route. And actually, there's opportunities for us to develop clinical support workers at higher level roles. It's not about taking work away from the registered, there's plenty of work, it's how we think differently about those roles and how we invest in people. And that's where I want to get to. I want to get to a point where we're going smashing those boundaries. There's leadership roles now. Yes, we need leadership, but we also need the clinical roles, we also need to be able to push those boundaries. Where we've got clinical band five, then how we're going to get there? I know that we've got some examples. And part of that band five element is where they get perhaps management roles, as in they've got team leading elements within their role for other support workers, which again is great, because you've got support workers leading support workers, so you might look at some team leading appraisals supervisions, all of that, alongside being a clinical support worker. I do think the scope of clinical work in it as well, but we just need to get those examples and get brave managers to want to be able to do it. It's really hard, isn't it? Because I bet there's people thinking, we need registered OT, so there's a massive shortfall. Why are we stopping people from going down that route? But if it's not what they want, if they're leaving something that they absolutely love, because that's the only option, that's not right either.

Hannah:

Yeah. It's not discouraging, it's showing alternatives.

Lorraine:

Exactly. We need the registered practitioners. There's so much complex work, there's research, there's clinical education, there's so much that within the four pillars that we need the registered workforce for, but we also need the unregistered workforce to bolster that as well.

Hannah:

Hugely. And take people with us.

Lorraine:

Yeah.

Hannah:

Is there anything else you'd like to add to anything we've discussed today?

Lorraine:

What I'd say is that I never thought I'd be where I am. So where you think you're going to end up doesn't necessarily mean that that is where you're going to end up. And I genuinely feel that some days am I working because I love it so much. So if you love your job as much as I do, it's not going

to be as difficult as you think it's going to be, because you want to do it, you want to make a difference. So there is definitely challenges to things I've had to learn and there's been a real steep learning curve, but it's been an enjoyable steep learning curve. You don't realise until you look back how far you've come, you think, six months ago, I'd have never done that, and all of a sudden, that's part of your daily work.

Hannah:

I've got a quick fire, finish the sentence kind of question to end with. Being part of the occupational therapy support workforce is...

Lorraine:

...such a rewarding career. Having the autonomy to work with patients is so rewarding, but you also need to develop and grow yourself to be the best support worker it's ever evolving. It's really important to share these stories and inspire others.