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To disclose or not to disclose? Benchmarking disclosure of a specific learning difficulty in physiotherapy education and the NHS workplace

- [P.C. Goodwin](#),
- [J. Rooney](#),
- [G. Yeowell](#)

Relevance: Firstly, we report the incidence of disclosure of a specific learning difficulty (SpLD) by physiotherapy students in a Higher Education Institute (HEI), making it relevant to the congress theme, Education. Secondly, we compare this to reports of disclosure in the NHS workplace, challenging managers to address the apparent discrepancy. This makes it relevant to the congress theme, Policy, Strategy and Influencing (in the workplace).

Purpose:

- 1) To design an evidence-based data retrieval procedure from HEI databases to accurately report students disclosing a SpLD.
- 2) To identify characteristics of students who have disclosed a SpLD on an NHS commissioned physiotherapy programme and compare to NHS employer Equality and Diversity annual reports.

Approach/evaluation: This was Phase 1 of a 3-phase evaluation. In order to extract data relevant to the reporting of SpLD, a literature search was carried out to identify relevant factors. A repeatable procedure was then designed to allow HEIs to retrieve and compare the data. We benchmarked three physiotherapy cohorts at a UK HEI and compared them to: (1) overall student data at the HEI; (2) the percentage of staff who disclosed a disability in the NHS.

Outcomes: Students with a SpLD access higher education via both traditional and non-traditional routes. The most frequently disclosed SpLD was dyslexia. On average, more physiotherapy students (11%) disclosed a SpLD than students in the university as a whole (7%) or compared to NHS staff (3.5%). A smaller percentage of students with a SPLD did not proceed through the programme compared to those without a SpLD. Students who disclosed their SpLD and in receipt of a Personal Learning Plan (PLP) generally achieved a better degree classification than those who disclosed but were not in receipt of a PLP. No students with a PLP obtained a Third Class Honours degree over the three cohorts studied.

Discussion and conclusions: We have produced an evidence-based, repeatable data retrieval procedure to allow comparison across HEIs. In Physiotherapy, there is a higher incidence of disclosure of a SpLD compared to the general student body and in the NHS workplace. Phase 2 explored reasons for disclosure or non-disclosure whilst as a student in University, on placement and in the workplace.

Impact and implications: By reporting the incidence of disclosure of a SpLD by physiotherapy students in higher education, and comparing this to reports of disclosure in the NHS workplace, we challenge managers to address this apparent discrepancy. We anticipate

this will improve support mechanisms for the employee and also facilitate the transition of physiotherapists with SpLD, from student to employee and back again.

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