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Embracing inclusive education practice

Presented by: Angie White



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Brunel
University
of London

Mrs. Angie White



Lecturer
Brunel University

Ultrasound Practice Educator
North Central London Imaging Academy

MSc RDMS RVT RCT PgC MSKUS



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Learning Outcomes

1. Understand the definitions relating to 'inclusion', and how inclusivity pertains to the learners, the environment and the educators within clinical education
2. Explore learning theories around inclusive education
3. **Reflect** on inclusion as it relates not only to our learners and the environment, but also to ourselves as educators

Why me?

Inclusion:

The practice of **creating environments** where individuals of all backgrounds, abilities and characteristics **feel respected, valued and fully engaged**

***INCLUDED IN THE ENVIRONMENT
PART OF A COMMUNITY***

Inclusive education:

“An approach to teaching and learning that ensures **all students**, regardless of their abilities, backgrounds, or needs, **have equal opportunities to participate and succeed in the educational environment**”

(Amayo et al. 2021)

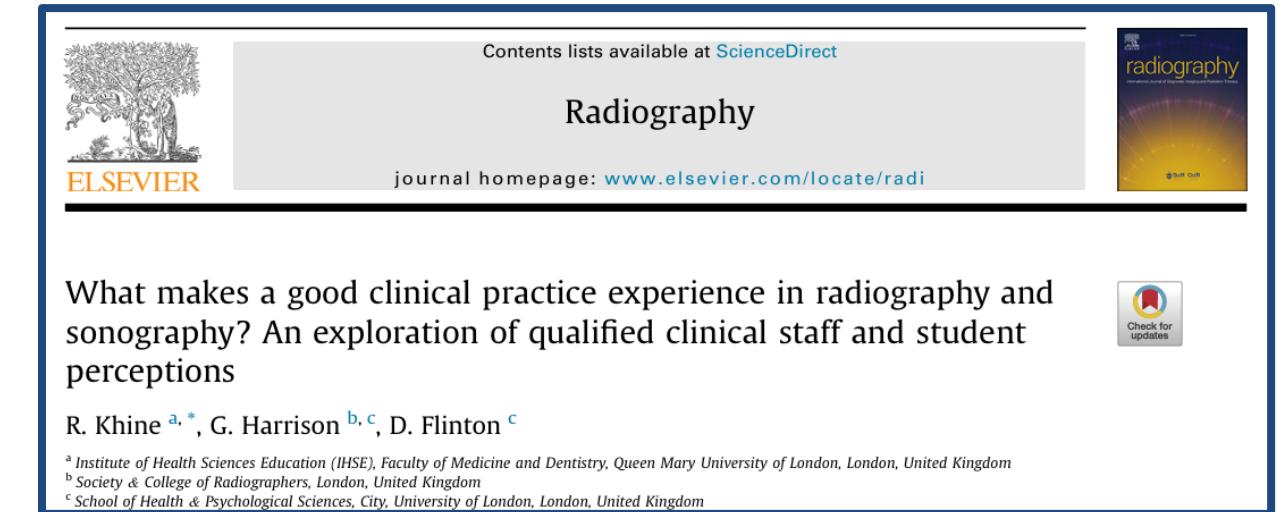
Why is inclusivity important?

To build a successful and safe learning environment

(Khine et al. 2024)

Invitational Theory:

- Enhance learning by ‘inviting’ the learner into the experience, and remove obstacles
- Related to the FIVE “Ps”(people, places, policies, programmes, and processes)



Contents lists available at [ScienceDirect](#)
Radiography
journal homepage: www.elsevier.com/locate/radi

What makes a good clinical practice experience in radiography and sonography? An exploration of qualified clinical staff and student perceptions

R. Khine ^{a,*}, G. Harrison ^{b,c}, D. Flinton ^c

^a Institute of Health Sciences Education (IHSE), Faculty of Medicine and Dentistry, Queen Mary University of London, London, United Kingdom
^b Society & College of Radiographers, London, United Kingdom
^c School of Health & Psychological Sciences, City, University of London, London, United Kingdom

Levels of human behaviour

Four levels of human behaviour.

Intentionally disinverting:	Conscious behaviour that demotivates learners, focusing on the negatives which discourages educational outcomes being met and undermines learners.
Unintentionally disinverting:	Accidental or unplanned behaviour that hinders positive educational outcomes stopping the student reaching their potential.
Unintentionally inviting:	Accidental or unplanned behaviour that facilitates positive educational outcomes by allowing the student to reach their potential.
Intentionally inviting:	Conscious behaviour that empowers learners and facilitates positive educational outcomes by allowing the student to reach their potential.

The Learner: Protected Characteristics

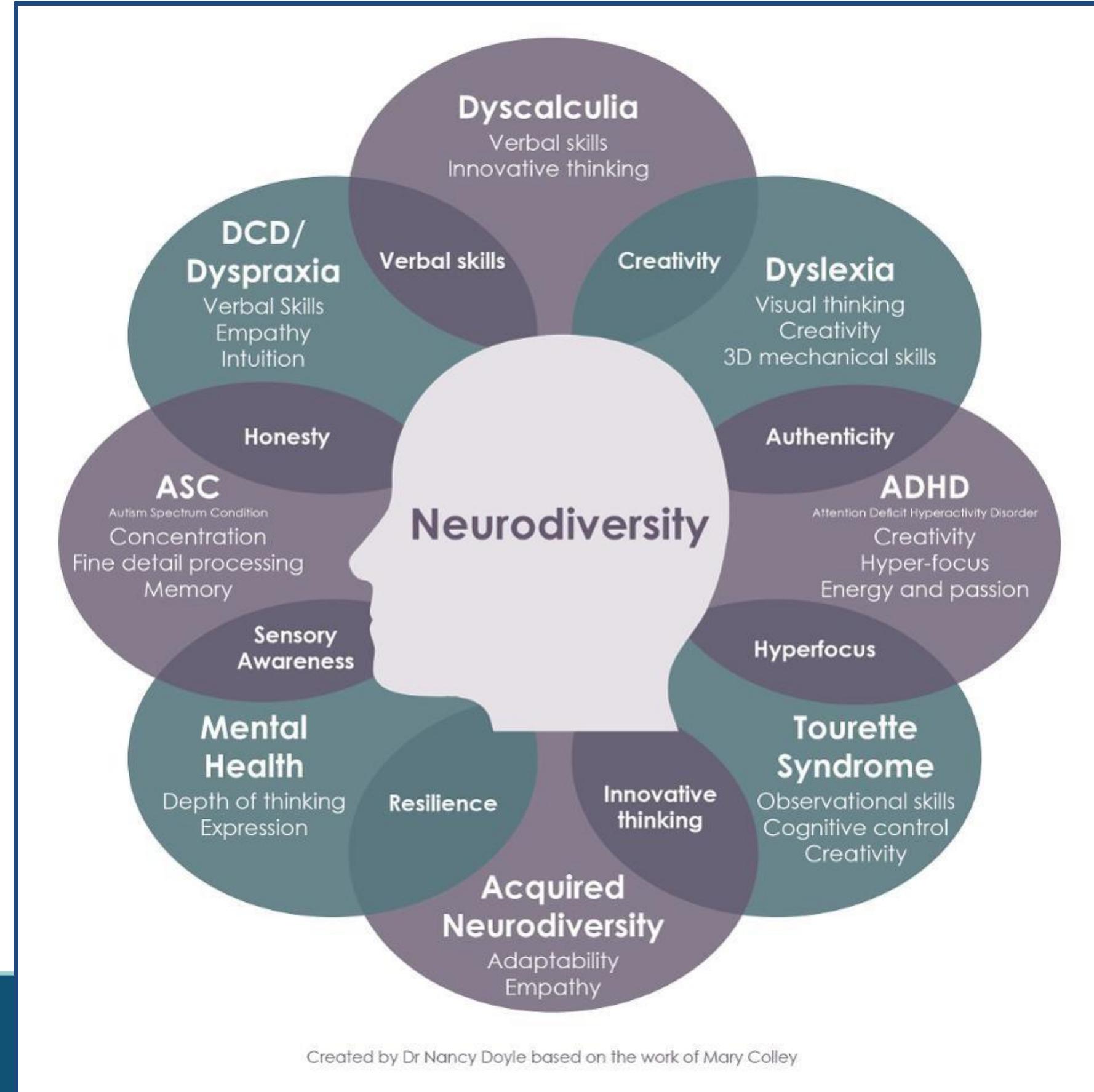
Equality Act 2010



(Kingston and Richmond NHS Trust, 2025)

The Learner: Neurodiversity

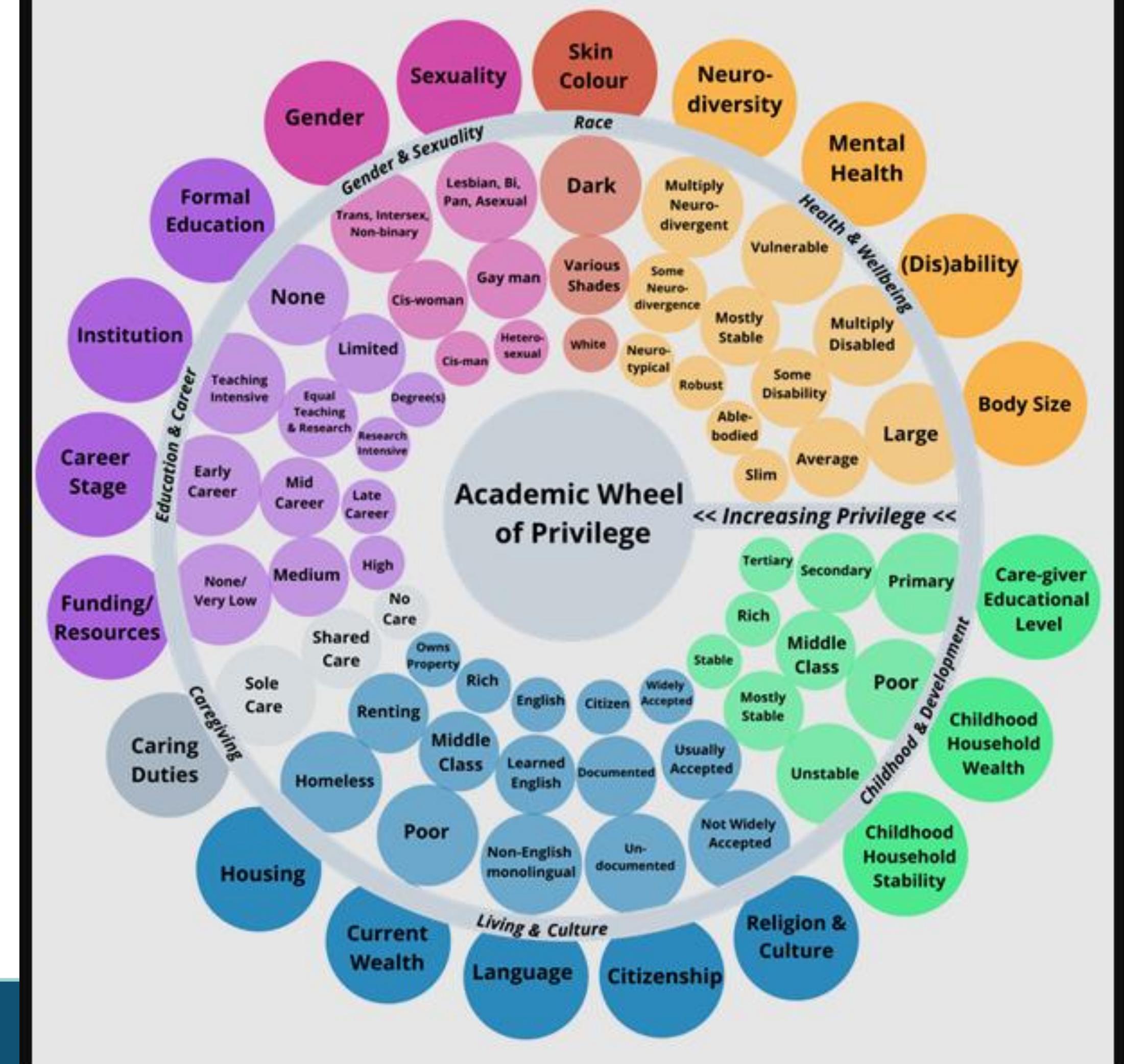
Challenges have reciprocal strengths



(Autism Ready Libraries, 2023)

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'Academic' Wheel of Privilege



(Elsherif et al.,
2022)

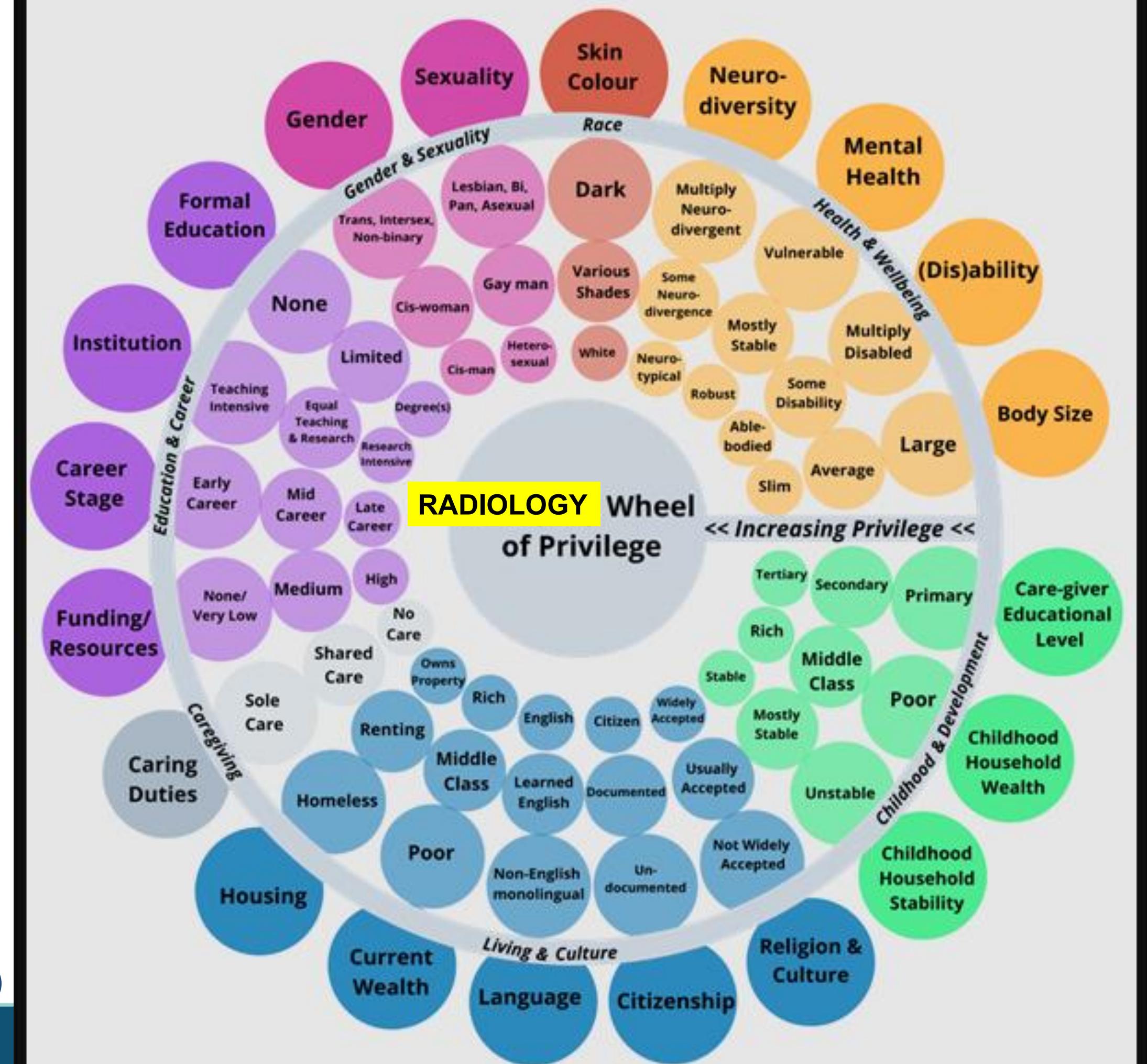
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RADIOLOGY

Wheel of Privilege

What's missing?

(Elsherif et al., 2022)



ULTRA-SOUND Wheel of Privilege

What's missing?

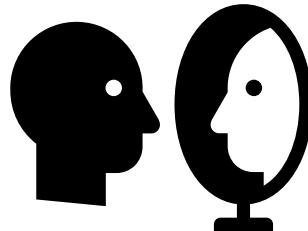
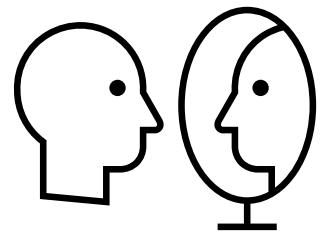
The Learner: Intersectionality



“aspects of identity and social status intersect to shape individuals’ experiences and opportunities in ways that reflect broader societal systems of oppression and privilege”

Reflective Task:

Can you think of some examples of intersections that are present/make a difference in:



1. Your clinical practice?
2. Your practice as an educator?

(Mosley et al., 2025)

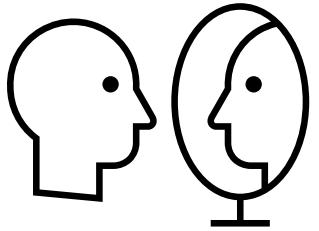
The Environment: Micro-aggressions

*“The **everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership.**”*

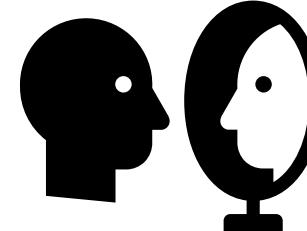
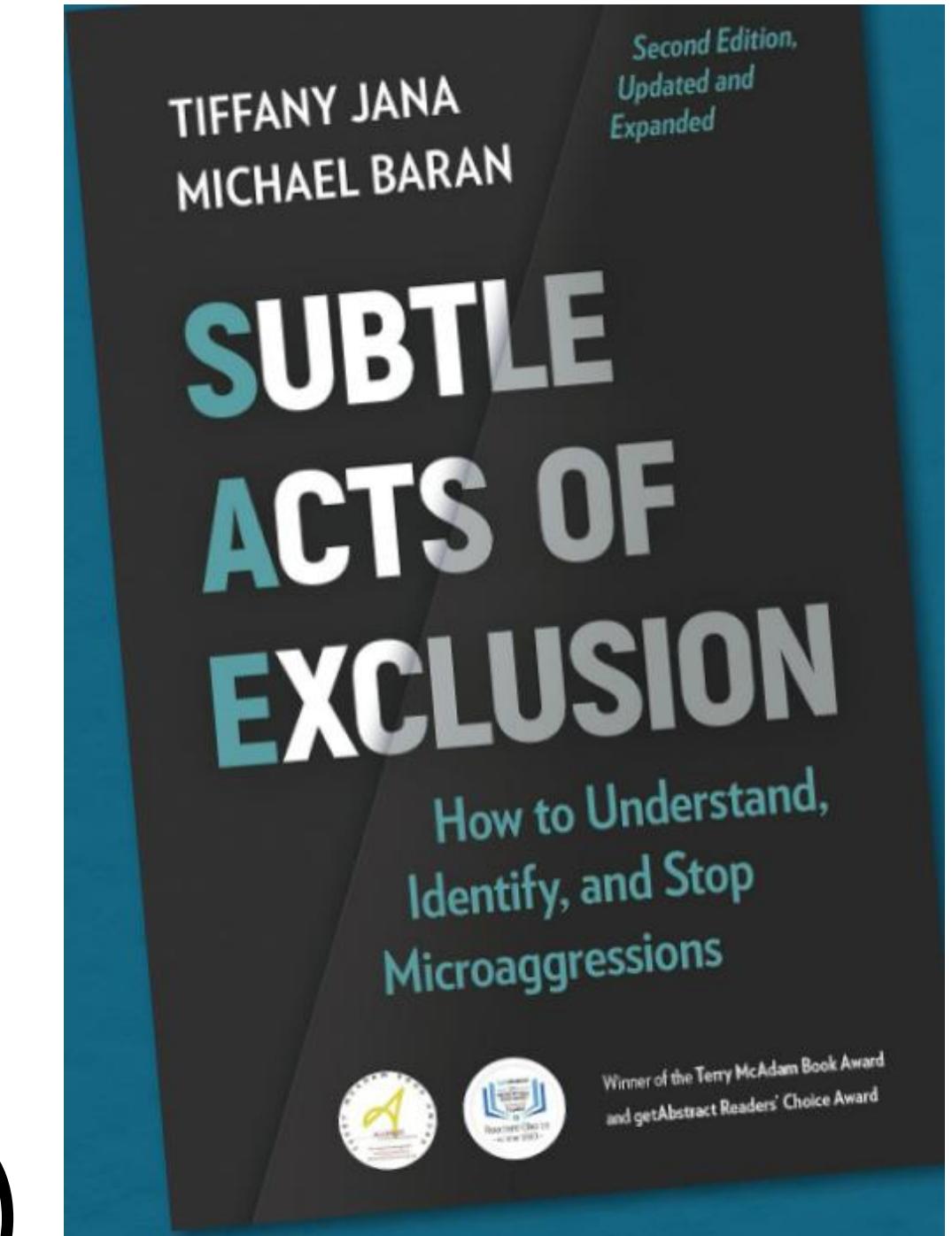
“Death by a thousand paper-cuts”

(Cooper S, 2025)

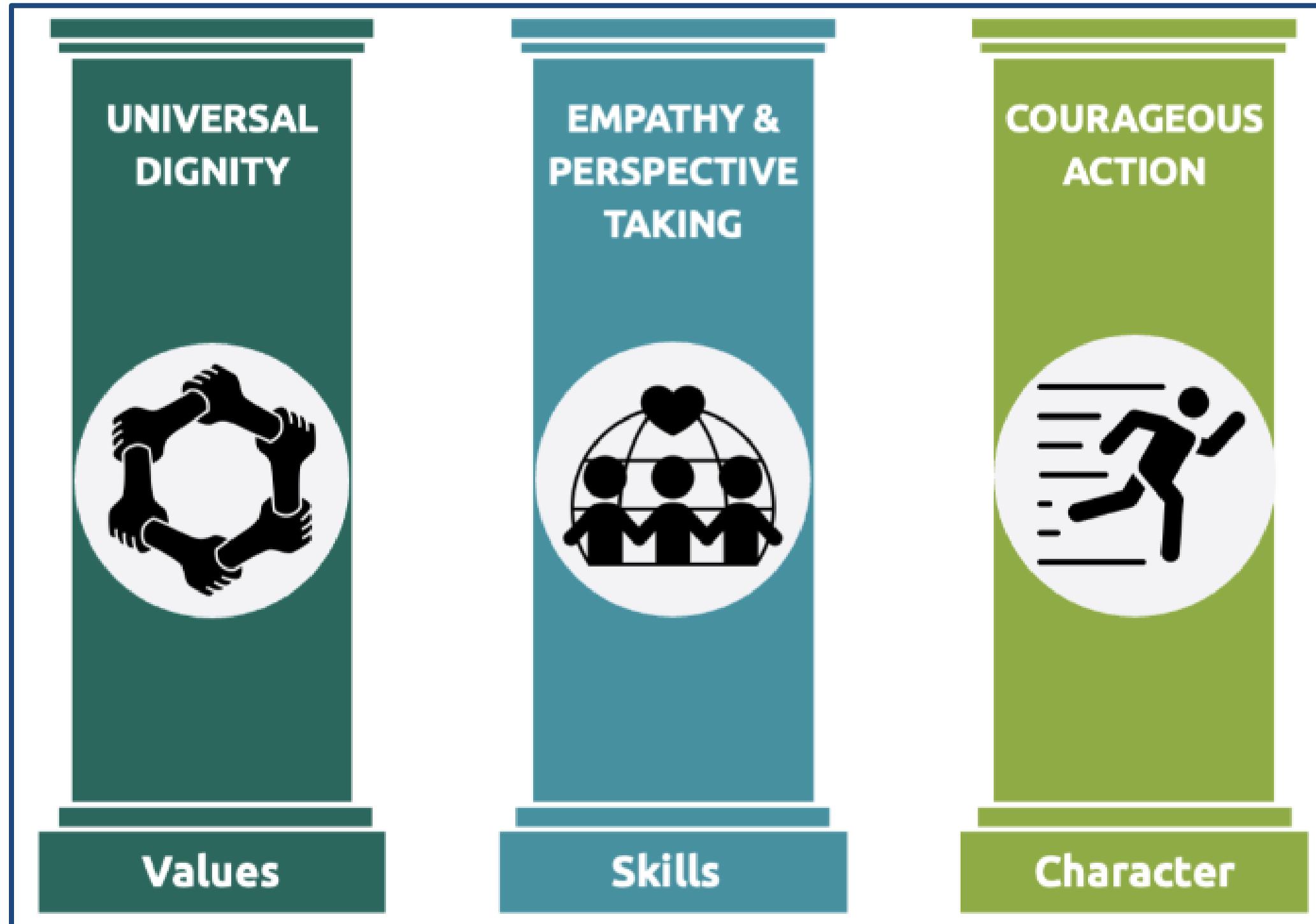
Reflective Task:
Can you think of some examples of micro-aggressions you encounter?



What about the learners you support?



The Educator: The Inclusive Mindset



(Shriver et al., 2023)

1. *“Consider which students may be excluded as a result of a given teaching strategy”*
2. *“Understand that skills are not innate or fixed, but are instead grown and developed over time”*
3. *“Embrace, encourage, and explore failure”*

(Amayo et al., 2021)

Tips for Inclusive Teaching

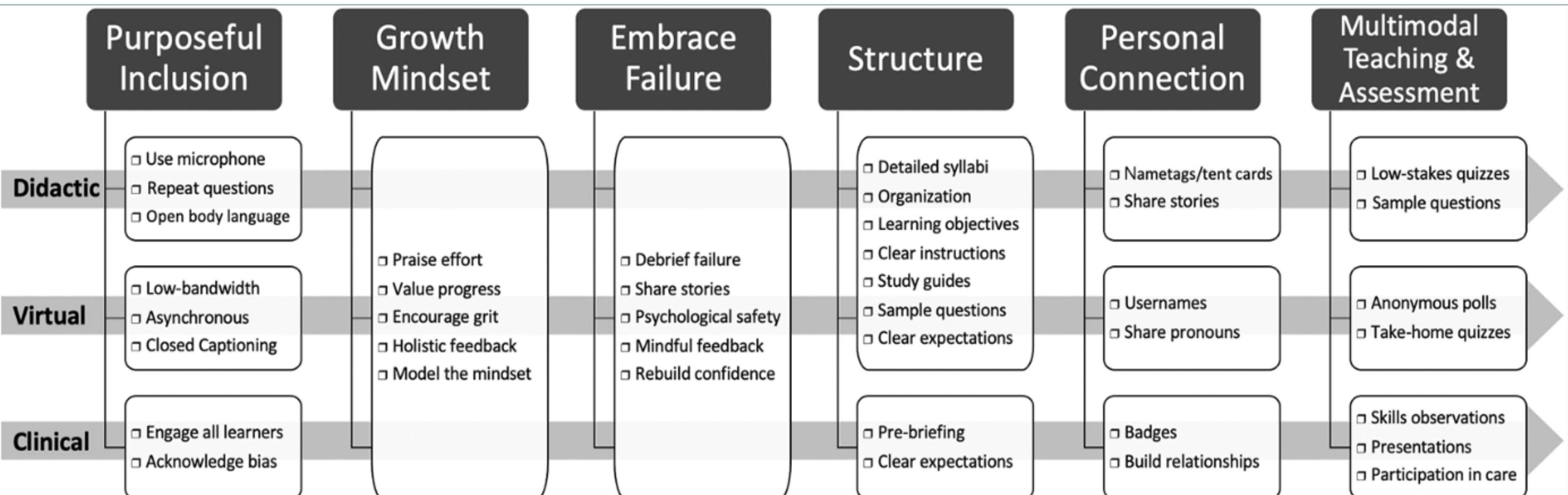
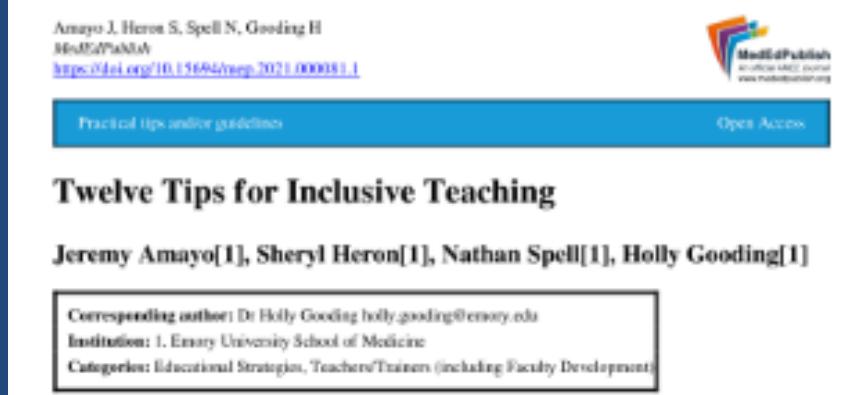


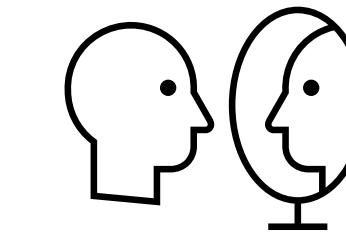
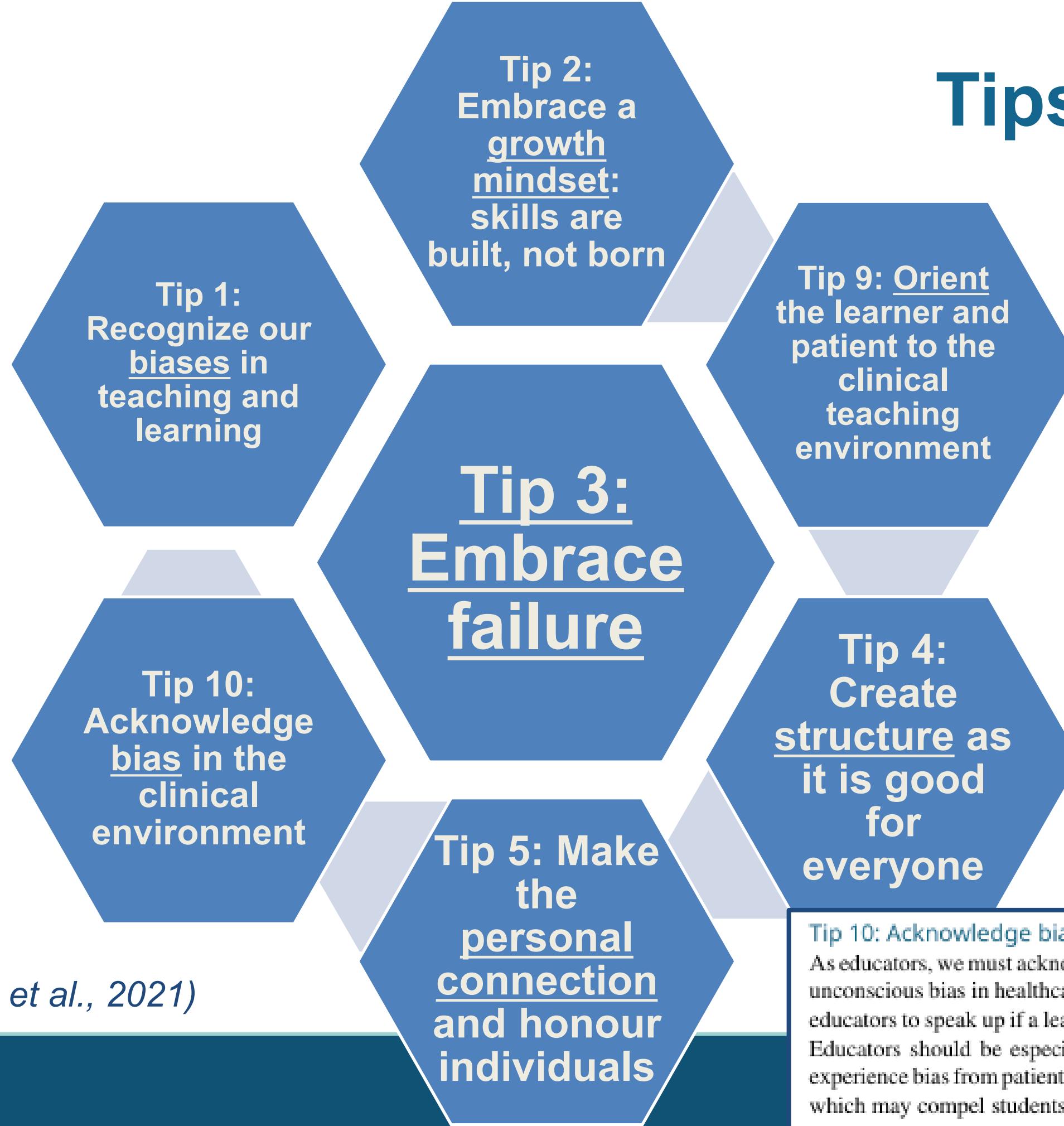
Figure 1: Inclusive Teaching Themes Applied to Didactic, Clinical, and Virtual Teaching



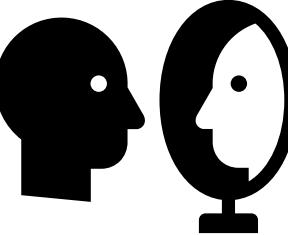
(Amayo et al., 2021)

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Tips for Inclusive Teaching



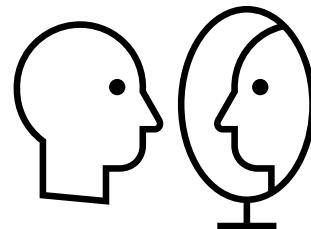
Reflective Task:



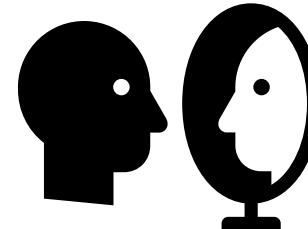
1. What biases are present in the clinical environment?
2. What steps do you take to orient the learner and your patient to the clinical teaching environment?

Tip 10: Acknowledge bias in the clinical environment

As educators, we must acknowledge there is potential for bias in the clinical environment. There is a growing literature on unconscious bias in healthcare and its impact on clinical decision making (Dehon *et al.*, 2017). It is our responsibility as educators to speak up if a learner experiences or witnesses bias either by their patients, their teachers, or their colleagues. Educators should be especially mindful of under-represented in medicine (URIM) students as they may personally experience bias from patients or their teachers. This can contribute to feelings of "being the only" and imposter syndrome, which may compel students who are URIM or who are introverts to fade into the background.



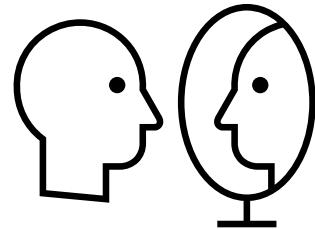
Reflective Task



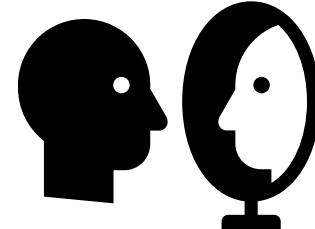
Consider a time that a learner you supported didn't succeed...

Thinking about the learner:

- Was there a characteristic that may have prevented their inclusion into the setting? Think about the 'wheel of privilege'...
 - Were they subjected to 'micro-aggressions' (or 'macro-aggressions')?
- Did they have any learning needs? Or other needs that may not have been met? How could these have been addressed?
 - Did they embrace failure, and grow from the experience? If not, why not?
- Did they make a personal connection? If so, how did that connection impact them? If not, why might that have been- was it purely down to some of the questions above?



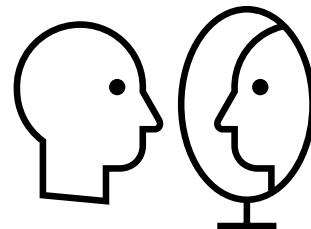
Reflective Task



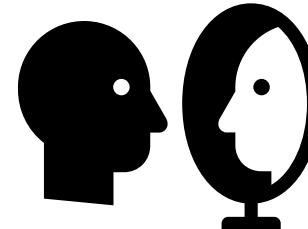
Consider a time that a learner you supported didn't succeed...

Thinking about the environment:

- Were they oriented properly to the department? Think about all small details- the toilets, the best area to eat, meet the staff important to their role, etc. Also include the 'unspoken norms'
- Were they included in discussion/banter? Think about all small details- the WhatsApp group, the inside jokes, etc.
- Was there bias within the clinical setting? Was that addressed?
 - Was there adequate structure for the learner?
 - Was there a procedure/process in place for failure?



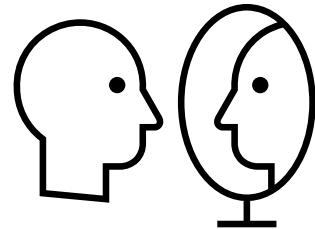
Reflective Task



Consider a time that a learner you supported didn't succeed...

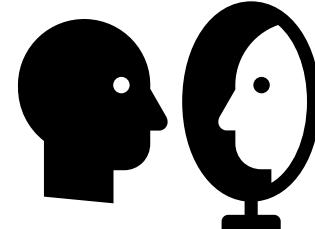
Thinking about the educator:

- What biases did you have about the learner?
- Did you have a 'growth mindset'- did you recognise that skills are built, not born?
 - Did you embrace failure, and guide the learner based on failure?
 - Did you make a personal connection and honour the individual?
- Did you have an 'inclusive mindset'- did you support your learner to be included?



Reflective Task

Final Thoughts



Reflecting on these questions, was there any way to better support the learner in the situation?

Will this reflection impact future support for learners?

Further reflection: When was the last time you were surprised? Why were you surprised?

Conclusion

- **Inclusion is important to facilitate successful learning**
- **Inclusion is an encompassing word describing many factors**
- **We as educators have a big impact on our learners to facilitate inclusion**
- **Teach our learners to embrace failure AND embrace failure in ourselves**
- **Never stop reflecting!**



Resources/References

Resources

- **The Power of Inclusive Education** (<https://youtu.be/ZIPsPRAZP6M>)
- **A Guide for ensuring inclusion and equity in education - UNESCO Digital Library** (<https://unesdoc.unesco.org/ark:/48223/pf0000248254>)
- **Applying Inclusive Teaching Principles to Clinical Education** (<https://ctl.columbia.edu/resources-and-technology/resources/inclusive-teaching-clinical/>)
- **Universal Design for Learning** (<https://www.cast.org/what-we-do/universal-design-for-learning/>)

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Do you have an understanding of medical imaging?

0

0

0

0

0

Loading...

 A. Yes - I'm all knowledgeable B. Yes! A little bit? C. Umrrrr is that taking images of my medicals? D. No definitely not!