Guidelines for clinical facilitators

Bachelor of Nursing
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GLOSSARY OF TERMS

Academic Liaison
Contact person assigned to the Clinical Facilitator to assist in academic matters.

Clinician
Registered nurse (RN) or registered midwife (RM) operating within the health agencies.

Clinical Facilitator
Clinical Facilitators (previously referred to as Clinical lecturers) are employed by the School of Nursing and Midwifery (either directly or via secondment arrangements) to assist in the education, support and assessment of students undertaking clinical placement activities.

Clinical Placement Officer
Clerical staff member appointed to assist in the Division of Health Sciences Clinical Placement Unit (CPU) to assist with coordination of student placements.

Clinical Placement Unit (CPU)
Divisional unit staffed by non-academic staff to plan, manage and coordinate the field placement activities for the Division of Health Sciences.

Course
A unit of study (previously known as a subject) several of which contribute to a Program (Bachelor of Nursing degree).

Course Coordinator
Academic staff member responsible for the coordination of specific courses within the program.

Mentor
A mentor is an experienced staff member who provides an advisory role about ongoing developmental issues such as career planning and direction.

Preceptor
A clinician, working in association with the Clinical Facilitator and the student, provides workplace support to students. Preceptors are more commonly associated with students’ clinical placements as they work with students to deliver patient care and provide advice and guidance about day to day clinical activities.

Program
A series of courses, having been accredited, being the requirements for an award e.g. Bachelor of Nursing.

Program Director
Academic staff member who is responsible for the coordination of programs or stages of programs.

Student Placement System (SPS)
The software program to assist students in the selection of their clinical placements and associated data management.
1 INTRODUCTION

Thank you for your interest in working with nursing students at the University of South Australia School of Nursing and Midwifery. We appreciate your commitment to the future generation of nursing professionals and in ensuring we produce graduates of a high standard who are ready to undertake safe clinical practice.

This document is a key resource for all Clinical Facilitators. Clinical Facilitators include those people directly employed by the University of South Australia (UniSA) as well as those provided by a placement venue under reimbursement arrangements with the School of Nursing and Midwifery (SONM) at UniSA. This document is a supplement to the induction and support programs offered by the School and the information available on the clinical facilitator resource website https://lo.unisa.edu.au/course/view.php?id=5396

As of 2016, preparation of clinical facilitators who supervise students in the health care field will be based on the Health Workforce Australia (HWA) Clinical Supervision Support Program (CSSP) and incorporated into workshop training days. Further details can be found at http://www.hwa.gov.au/our-work/build-capacity/clinical-supervision-support-program

1.1 Aim and Objectives of Clinical Placements

The aim of clinical placements is to provide quality diverse health care and nursing practice experiences to enable students to learn from their clinical experiences and then be able to meet the course and program objectives. This enables the student to demonstrate the professional competencies required to practice as a beginning registered nurse (RN) at the end of the program. Inquiry-based learning is a key educational philosophy of the programs offered by the School of Nursing and Midwifery and requires students to engage in the learning process through problem solving, critical thinking, reflection and taking responsibility for their own learning.

Objectives for each course are available in the relevant Course Outlines and reflect the University’s Graduate Qualities. Further information about the University of South Australia Graduate Qualities may be found at http://w3.unisa.edu.au/gradquals/default.asp. Clinical Facilitators have an important role in student’s ability to achieve program, course and placement aims by ensuring that the educational experience is sound and the student is sufficiently supported to enable them to succeed.

2 ROLE EXPECTATIONS

2.1 Clinical Placement Unit

Staff within the Clinical Placement Unit (CPU) coordinate student clinical placements in the Division of Health Sciences. As part of this function the CPU will provide you with a course specific package of information, including all assessment requirements. CPU staff will answer questions about student allocations, information packages and clinical venue organisational matters.

Questions about academic course matters and/or student matters should be directed to the course specific Academic Liaison staff.

Useful website resources:
- Clinical Placement Unit (CPU) Clinical Placement Unit (CPU)
- The School of Nursing & Midwifery http://www.unisa.edu.au/health-sciences/schools/nursing-and-midwifery/

The CPU uses a computer software program known as the Student Placement System (SPS) which allows students to allocate their preferences for available placements. Specific venue information such as contact persons and venue requirements are also available and where appropriate provided to students and staff.

2.2 University employed clinical facilitators

Enquiries regarding work availability, contracts and timesheets are to be directed to the Clinical Operations Manager.

Certificate and personal detail updates are to be directed to the School Manager.

2.3 Clinical Facilitators Role description

Clinical Facilitators are employed by the School of Nursing and Midwifery directly or the venue provides the facilitator (and is reimbursed by the School). The role is to assist in the education, support and assessment of students undertaking a clinical placement. Clinical Facilitators should be familiar with, and be working toward achieving, the University's Teaching and Learning principles as outlined in the Teaching and Learning Framework available from this link http://w3.unisa.edu.au/academicdevelopment/engagement/framework.asp

All relevant documentation and placement information can be located through the Nursing Clinical Facilitator website: https://lo.unisa.edu.au/course/view.php?id=5396
Uniform
Uniform requirements for Clinical Facilitators – Consist of Pale green striped shirt (available from Valerie Travers), Navy pant and black shoe. Name badges can be arranged through School of Nursing & Midwifery Reception nursing.enquiries@unisa.edu.au. Clinical Facilitators are required to purchase and wear correct uniform when facilitating students.

Specific duties
Your employment contract (or equivalent) has specific details which should include the following about Clinical Facilitation:

- Demonstrate professional competencies required to practice as a registered nurse in a variety of health care settings.
- Have a sound understanding of the educational issues associated with practice-based education, including the specific requirements of the course for which the staff member is employed.
- Remain up to date with specific UniSA and clinical venue policies and guidelines regarding clinical placement facilitation.
- Facilitate learning experiences outside the University in a professional setting relevant to the area of study.
- Promote and facilitate links between theory and practice for students.
- Obtain clear details of assessment criteria, evaluation/assessment feedback sheets, and indication of performance standards from Course Coordinators.
- Inform students clearly, at the commencement of the placement, about the purpose and method of the placement, orientation requirements, the timing of assessment activities and the dates for submission, and the relative weight and number of assessment tasks.
- Encourage students to develop skills in problem solving, critical, reflective and creative thinking.
- Meet and orientate students (as required by designated venue) on the first day of the clinical placement
- Meet with students a minimum of twice weekly to discuss progress and undertake assessment. Clinical facilitators are required to spend a total of 3 hours face to face and 2 hours if contracted by phone with each student they are allocated. It is expected that clinical facilitators will spend a minimum of 30 minutes per visit with each student.
- Maintain regular contact (minimum contact weekly) with the UniSA Academic Liaison staff member. Clinical facilitators are required to submit a weekly summary sheet to their Academic Liaison. The Clinical placement unit will provide clinical facilitators with their summary sheet which includes details of students allocated. The summary sheet template (Appendix D) is available via the clinical facilitator resource website https://lo.unisa.edu.au/course/view.php?id=5396
- Assess students work in a fair, consistent and constructive manner and provide a mark or grade in consultation with experienced registered nursing staff that have worked with the student or directly supervised their practice.
- Conduct a formative assessment (Appendix E) of the student’s performance 2 weekly during the placement to ensure alignment between Clinical Facilitator and registered nursing staff (who have worked with the student or directly supervised their practice) assessment of the students’ performance - and where the student is not meeting milestones, instigate strategies to inform the student the areas in which they need to demonstrate improvement - or where warranted, instigate the clinical challenge process.
- Conduct a summative assessment (Appendix E) of the student’s performance at the end of their placement.
- Provide written and oral feedback in the timeframe determined by the University to assist students to improve their performance during placement, and complete reports about student performance, including the instigation and actioning of the clinical challenge process as directed, and in consultation with the UniSA Academic Liaison/Course Coordinator.
- Maintain and submit records of all contact and discussion with students. University employed clinical facilitators are provided with a University email account for all work related communication.
• Submit the documentation listed under ‘4.8 Management of Documentation to the Academic Liaison’ as directed by the relevant Course Coordinator. Clinical facilitator contact forms 1 & 2 (Appendix C) are available on the clinical facilitator resource website to record student roster and summary of interactions with students.

• Attend Clinical Facilitator workshop prior to commencement of contract and on an annual basis

• Attend Division/School/Program team meetings as required.

**NOTE 1:** Clinical Facilitators are responsible for the support and education of the student on placement. They do not provide client/patient care unless employed by the venue to do so. The RN employed by the venue continues to be accountable for care provision and must be consulted about such plans, actions and outcomes.

**NOTE 2:** There are obligations for nurses and midwives to report notifiable conduct to the Australian Health Practitioner Regulation Agency. The Guidelines for Mandatory Notifications are available at [http://www.ahpra.gov.au/](http://www.ahpra.gov.au/)

**Induction – Pre ELA Clinical Placement**

At this time Clinical Facilitators will be provided with information about the courses and workloads and responsibilities including students with special needs, shift requirements, and assessment. Each Clinical Facilitator is assigned an Academic Liaison who is a member of the course teaching team and who will provide assistance and information about all teaching and assessment matters. Clinical Facilitators are asked to access relevant documentation and information via the Clinical Facilitator website pertaining to their allocated students [https://lo.unisa.edu.au/course/view.php?id=5396](https://lo.unisa.edu.au/course/view.php?id=5396)
3 **PROGRAM INFORMATION**

3.1 **Bachelor of Nursing Program**

Further information is available from School of Nursing & Midwifery [http://www.unisa.edu.au/nur/](http://www.unisa.edu.au/nur/)

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4 MANAGING CLINICAL PLACEMENT ACTIVITIES

In line with program teaching and learning principles of inquiry-based learning that promote learner independence, problem solving and reflective practice; students are assumed to be responsible for being participants in the learning process. Students are expected to do the following:

- Identify their individual learning needs in readiness for placement.
- Prepare for the clinical placement by reading and practising skills as necessary.
- Openly communicate their needs and concerns with the relevant persons involved in their placement.
- Operate within the guidelines and regulations of the health agency and University.
- Participate in both their assessment and general evaluation of their practice experience.
- Be familiar and working towards the NMBA National Competency Standards for the Registered Nurse.
- Provide informed critique of educational and healthcare practices.

You are employed to spend a total of three hours per week face to face (meet twice a week) or, two hours per week, if allocated phone facilitation (speak twice a week), with each student (as is detailed in the employment contract).

4.1 Learning Objectives

Bachelor of Nursing students are required to focus their learning on placement through development of a learning plan based on particular objectives. The Learning Plan has been initiated in 2016 and sits at the front of the NCAS/UNISA Clinical Assessment Tool forming part of the students clinical placement assessment. This document allows students to familiarise you, their Clinical Facilitator, and clinicians they will work with, to their individual objectives for the clinical placement. These should be based on the students self-assessment of their clinical skills and knowledge, strengths and weaknesses; and are aligned to the course objectives (i.e what it is possible for them to achieve during the placement). The plan must be completed and shown to you at your first meeting with the student. You are not expected to mark this piece of work. Failure to complete this plan will lead to a Fail grade for the clinical placement and therefore the course. Further detail for students re how to complete the plan is on the course site and in Appendix A.

Recommendation: See Appendix A- Student's Development of Learning Objectives for guidelines on assisting students to develop their own learning objectives.

4.2 Roles of Mentors and Preceptors

Mentors and preceptors are the RNs who work with students and provide feedback to Clinical Facilitators during the clinical placement. See Glossary for definitions. They do not replace the Clinical Facilitator. Preceptors usually work with students on a regular basis and play a major role in providing feedback about students’ performances.

Recommendation: In addition to the twice weekly student meetings also schedule at least weekly feedback sessions with preceptors and students to discuss student progress, remembering that confidential communication and documentation of students’ progress is essential.

4.3 Observation of Student Performance

Observation and one-to-one teaching is an important part of clinical placement. You may spend a portion of some days working with one or two students, particularly where there are concerns about a student’s performance. It is expected that facilitators will make face to face contact with students at a minimum of two occasions each week, unless the arrangement is for telephone facilitation of which minimum contact remains the same.

Recommendation: Observation of students’ performances is an important strategy to verify the feedback from others about student’s progress.
4.4 Providing Student Support & Assessment of Student Competence

Supporting Learning and Assessment of Student Performance

As noted under specific duties of clinical facilitation, Clinical Facilitators are responsible for the support and education of the student on placement. This requires achieving a balance between supporting students to gain confidence in the placement environment and apply what they already know while also learning new things. Clinical Facilitators also need to make assessments of how well students are performing against the course requirements. This is why it is necessary for Clinical Facilitators to read the Course Outline each time a new group of students are supervised to ensure that course requirements have not changed and the correct standards are being used against which to judge the student’s performance.

Clinical placement is one of a number of forms of experiential learning for students in programs. Learning through experience has many benefits for students. It provides the student with an opportunity to learn how to apply their theoretical knowledge in ways that are effective in practice. Clinical placement also helps students learn about the capabilities necessary for practice and to recognise when they need more information and where to find it in a practice setting. They get to experience the demands of actual health care delivery and how this can impact on clinical decision making. However, at the same time they are assessed as to the breadth and level of their performance and knowledge. This is why it is important for Clinical Facilitators to stay well informed about the specific course requirements rather than rely on only their broader experiences of what is appropriate practice for RNs in that particular care context. It is for this reason also that students may participate in various venue placement education or staff development opportunities but not without first achieving the stated course aims and objectives.

Effective clinical facilitation requires a repertoire of skills that allow the Clinical Facilitator to develop the necessary relationship with students that respects the student’s individuality and learning needs at the same time as allowing appropriate assessment of student competency.

Some of the challenges of conducting assessment that relate to marking assessments as well as assessing clinical performance include:

- Being fair, equitable and objective
- Understanding the assessment framework, tools and criteria against which judgements are made
- Balancing a personal perspective of student performance against the university criteria (which includes the professional standards)
- Handling the consequences of assessment decisions
- Handling the situation where you have to directly facilitate open communication and discussion of feedback between students and the staff in the venue/placement.

Teaching English as another Language (EAL) and International Students

There is an increase in students for whom English is Another Language (EAL) studying at UniSA. These students can be permanent residents here in Australia or be here only while they study. This cohort of students reflects changes in the composition of our patient and health workforce populations. Resources to better understand and address the needs of these students are available from the following UniSA site http://www.unisa.edu.au/ltu/staff/practice/internationalisation/nesb.asp

Some students may not have previously experienced the Australian health care system. If fluency in English is limited they may need more time to respond in conversations. This extra time may be necessary for them to process the communication which often involves translation from English to their first language, formulation of a reply and translation of the reply back into English.

It is the Clinical Facilitator’s role to support the student in identifying and communicating such needs to the relevant placement staff and their preceptors so the placement experience is appropriately supportive. Academic Liaison staff may suggest additional strategies to help students improve their communication and assist facilitators in making assessments of the safety and effectiveness of student communication skills.
First Week of Placement

Orientation to the Venue

Venues differ in how orientation is conducted. Sometimes this is undertaken by venue staff and in other places it is undertaken by clinical facilitators. Clinical Facilitators are encouraged to familiarise themselves with key venue policies such as Schedule 8 and Intravenous medication administration by students, emergency phone numbers, injury and incident reporting, venue facilities including parking and security issues, staff roles, shift times and behaviour expectations, regular and emergency contact details and expectations for students.

Clinical Facilitators are required to provide their contact details to their allocated venue along with the Clinician Information sheet relevant to their allocated ELA. Refer to clinical facilitator resource website for clinician information sheet located under relevant ELA https://lo.unisa.edu.au/course/view.php?id=5396

All students are required to bring original documentation of ALL of the following to be presented at orientation:

- National Criminal History Record Check (through the DCSI screening branch) **Required by all SA venues**;
- National Police Clearance. Required for interstate venues;
- Provide First Aid Certificate;
- CPR Certificate (current);
- Medication Calculation Results;
- Placement Orientation Checklist (South Australian requirement);
- Immunisation Records.
- WHS checklist and certificate
- Passport to Placement checklist – checklist of all documentation students are required to provide. Available on the clinical facilitator resource website https://lo.unisa.edu.au/course/view.php?id=5396

The student group:

- Give students your contact details and encourage them to contact you with all questions and concerns. University employed clinical facilitators must communicate with students through their University email account.
- It is advisable to give the university pager to students instead of your mobile number. Your mobile number will be provided to CPU by the School. Students will be provided with the pager number on which they will contact you. If you require the pager number, please contact CPUOffice@unisa.edu who will provide you with the correct number.
- Confirm that students have the necessary course documentation and understand their assessment requirements. Students are provided with hard copy documents and can get these online from the course homepage.
- Let the students know your expectations about how you conduct facilitation including that you will seek feedback from other staff about their progress. Explain how you will communicate this feedback to them and clarify that you are ultimately responsible for all assessments.
- Establish an agreed regular debriefing time and place. This may include group as well as individual sessions.
- Discuss the assessment requirements and your expectations for how they will submit them to you.
- Clarify your expectations of how students will be involved in formative and summative assessments.
- Reinforce with students APRAH’s social media policy.

Individual students:

- In the first week ask the student about their strengths, limitations, placement expectations, what they plan to learn and how they will achieve this (strategies). Use the assessment items as a frame for this discussion and invite students to disclose (if they wish to) any issues associated with a Disability Action Plan.
• Plan how and when you will communicate with each other (mode, time and location to allow private and extended conversations) noting that students should not be expected to submit assessments earlier than as stated in the Course Outline.

**During Subsequent Weeks**

• Contact the students a minimum twice weekly (total of three hours face to face or two hours if allocated phone facilitation) to support their learning and collect the evidence necessary for you to assess their competence. At each contact ask the student open-ended questions related to their knowledge skills and attitudes. The following are general examples remembering that the Nursing Competency Assessment Schedule (NCAS UniSA Assessment Tool – available via the clinical facilitator resource website under the relevant ELA [https://lo.unisa.edu.au/course/view.php?id=5396](https://lo.unisa.edu.au/course/view.php?id=5396)) has NMBA RN competency domain specific cues for assessment of competency:
  - How comfortable are they with the placement/practice experience?
  - Are there any issues with interactions with other staff and patients?
  - What activities have they been involved in each shift and how useful are these in building learning, confidence etc.? Consider the **breadth** and **level** at which students are practicing.
  - How they have performed in these and discuss their perceptions of their competence.
  - What feedback have they sought and from whom, what has this feedback been, how has it been recorded and how does this fit with their assessment of their performance? Regularly discuss each student's progress with their preceptor or other relevant staff members.
  - Is progress being made? (Consider clinical challenge if deficits continue)

• Discuss with students the staff feedback you have received. Invite RN staff to join these discussions.

• Note any performance concerns and give the student formative feedback on managing the environment and improving their knowledge/practice. Inform your Academic Liaison of any concerns about a student that may impact on performance, as early as they are noticed, so this gives the student time to rectify.

• Ensure that assessments are completed on time (extensions cause overlapping with subsequent assessments). Compile results and submit at the end of the course to Academic Liaison.


### 4.5 Establish Processes for Liaison with UniSA Course and Venue Staff

**Prior to Commencement of Placement and In the First Week**

Initiate and maintain effective communication with venue staff to enable student outcomes to be achieved and reported. Contact the venue contact person and ward/unit relevant RNs to:

• Check that they have all the necessary documentation and information about the student placement.
• Clarify the match between their expectations and the requirements of the specific course objectives. Ensure they know students’ performances are assessed on the course objectives.
• Clarify who is to be involved in regular contact (i.e. venue staff, ward unit manager, preceptors, other RNs etc.). Provide them with the Clinician Information document that includes your contact details.

**During Subsequent Weeks**

• Contact the preceptor/RNs working with the students (usually twice a week) and ask questions that will provide evidence for your developing assessment of each student’s practice competence. Include in these questions the nature of challenges and support being given to the students.

**Communication with Academic Liaison and Course Coordinators**

• All Clinical Facilitators are allocated an Academic Liaison contact to deal with the placement issues that arise. Where the Course Coordinator needs to be involved in matters the Academic Liaison will arrange this.
• Email contact (through use of your University email account) with the designated Academic Liaison occurs weekly during the placement to keep them informed of student progress. Documentation can be brief. Where students are progressing as expected then it is enough to state this. Where students have had issues then dot points can be used to summarise the issue(s) and associated actions.
• At the completion of the course results for assessments need to be submitted to the Academic Liaison as results cannot be accepted from students.
4.6 Performance Assessment

Refer to the specific Course Outline for assessment details for each course. Keep descriptive and specific records detailing student progress as the basis of the assessment process.

Such notes may include:

- Discussions with the student about their learning needs and planned activities.
- Names and details of nurses with whom the student has worked.
- Activities performed by the students and who supervised and observed these.
- Verbal (or written) performance reports from the students and clinicians.
- Your reflections on the students’ performances, with substantiating evidence.
- Plan of action associated with teaching and assessment with outcomes and evaluations.

4.7 Clinical Challenge

The clinical challenge is a contract designed to facilitate targeted areas of learning for students where a significant and continuing deficit related to nursing practice has been identified and may lead to a fail grade. This will include any areas of unsafe practices to the student or others. The challenge contract gives the student an opportunity to learn specific knowledge and skills that result in improved performance on placement. A formal clinical challenge document is prepared by the Academic Liaison and/or Course Coordinator in discussion with the Clinical Facilitator and provides the student with feedback, clear strategies and time lines in order to redeem the challenge. The clinical challenge may be used either in the experiential learning laboratories or in the clinical venue.

Prior to a clinical challenge being implemented, the student, the clinician and the lecturer/clinical facilitator should discuss the performance to detail the circumstances and areas for improvement as specified in the Clinical Challenge Contract (refer to the clinical facilitator resource website for clinical challenge contract example) and below.


Method of Implementing a Clinical Challenge

When a student's competence, either practical or professional remains below the expected level, (previous feedback has not changed student performance) the following steps will be taken: The Clinical Facilitator will interview the student, initiate counselling and negotiate, in consultation with the Academic Liaison or Course Coordinator, a Clinical Challenge contract.

A written clinical challenge contract will be issued clearly detailing:

- The specific course objective/NMBA competency not being achieved,
- The recommended strategies for improvement,
- Assistance available,
- Objective/competency outcomes that must be achieved for a pass grade,
- The time-span in which the objective/competency must be demonstrated,
- Venue for clinical challenge evaluation (either nursing skills laboratory or clinical venue),
- Agreement to the conditions of the clinical challenge by all concerned,
- Copies of the clinical challenge will be given to: Student, Clinical Facilitator, Academic liaision staff member or Course Coordinator, and Program Director.

Redemption of Clinical Challenge

Successful completion of the clinical challenge requires a demonstration of the specified objective/competency be achieved within the specified time-span. Evidence of the student’s performance and other information impacting on the decisions regarding the redemption or failure of redemption of a clinical challenge are to be documented by the clinical facilitator/academic liaison staff member.
Redemption of the clinical challenge contract requires collaborative discussion and negotiation between the student, RNs and relevant others working with the student. The clinical facilitator may also review relevant documents prior to making the final decision.

It is expected that the clinical facilitator will seek assistance from the academic liaison staff member/Course Coordinator regarding the implementation and assessment outcomes associated with any clinical challenge processes implemented. If the clinical challenge is not successfully completed, or, if the student's performance is not maintained following a successful redemption of the clinical challenge, the student will receive a fail grade for the clinical assessment component of the course.

Right of Appeal – Clinical Assessment Outcomes

In the event of a student appeal, the University appeals process will be adhered to. See Assessment Policies and Procedures Manual http://w3.unisa.edu.au/policies/manual/default.asp:

All medication administration or medication management errors are to be treated as critical incidents with the necessary University of South Australia incident report documentation completed and submitted as specified on the form. The incident should be reported to the Academic Liaison with 24 hours of the event.

4.8 Management of Documentation

Clinical Facilitators’ Notes of Students’ Progress

As described above Clinical Facilitators are to keep confidential ongoing written records of interactions with students, concerns and progress toward learning outcomes (forms available on Clinical Facilitator website https://lo.unisa.edu.au/course/view.php?id=5396) and provide these to the Academic Liaison in cases where students are at risk, are removed from placement or fail the course. Refer to Appendix C for forms.

Assessment Items

Clinical Facilitators submit a final set of results at the end of the placement. This will include submission of relevant documents from the assessment tool for each student. The NCAS document belongs to the student and should not be kept by the Clinical facilitator at any point during placement. If you need to make comments etc please return the document immediately to the student for uploading to their e-portfolio. This is vital evidence for their graduate applications.

In addition to the above, in instances where students have failed the placement requirements – all Clinical Facilitator notes need to be sent to the Academic Liaison to assist with the student counselling process.

Clinical Facilitators are required to submit relevant reports as requested of the Academic Liaison as directed by the Course Coordinator.

<table>
<thead>
<tr>
<th>Documentation Clinical Facilitators required to submit to Academic Liaison</th>
<th>Time Frame to be sent to Course Coordinator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical challenges</td>
<td>Refer to academic liaison for process in managing development of a clinical challenge. All signed final documents to be submitted to the academic liaison at end of placement.</td>
</tr>
<tr>
<td>Written records of interactions with students</td>
<td>Recommend you retain copies of your student notes for 1 year.</td>
</tr>
<tr>
<td>Clinical facilitator contact forms</td>
<td>Recommend you retain copies of your student notes for 1 year.</td>
</tr>
<tr>
<td>Summary sheet</td>
<td>To be submitted at end of each week to Academic Liaison.</td>
</tr>
<tr>
<td>Learning plan</td>
<td>Remain in the NCAS tool for sighting by the CF on first day of placement.</td>
</tr>
<tr>
<td>NCAS assessment tool (final assessment)</td>
<td>Student cover page and pages 2 &amp; 3 to be submitted at end of placement to Academic Liaison.</td>
</tr>
</tbody>
</table>
4.9 General Information

Health Practitioner Regulation National Law Act 2010 – restriction on the use of Titles of Nurse and Midwife

Use of the titles ‘nurse’ and ‘midwife’ (along with registered nurse, nurse practitioner, enrolled nurse and midwife practitioner) are protected under the Health Practitioner Regulation National Law Act 2009 (‘the National Law’) and in this State the Health Practitioner Regulation National Law (South Australia) Act 2010.

As a consequence these titles can only be used as detailed in the Act and students are required to use the terms ‘Nursing Student’ when referring to themselves or signing documentation. It is the Clinical Facilitator’s role to ensure that students clearly identify and communicate their role in the clinical setting at all times.

Managing Missed Placement Attendance by Students

Students are required to notify the venue and the Clinical Facilitator, before the shift begins, if they are unable to attend placement. Students are required to provide a medical certificate for all absences (applies to one day of leave). The certificate is to be forwarded to the Academic Liaison once the clinical facilitator has received this. A medical clearance to practice is required following injury, surgery or a serious medical illness requiring extended leave. Students are advised to contact the Course Coordinator prior to commencing a clinical placement course or their Clinical facilitator if they are returning to placement.

Clinical Facilitators are asked to contact the Academic Liaison to discuss student absences in the following circumstances:

Students who are absent from their placement for a period of time due to illness put their ability to complete the course objectives at risk. They may not have adequate opportunity to demonstrate ability to meet the essential competency skill areas within the clinical assessment tool. Students are asked to discuss their sick leave with you. Clinical Facilitators are required to liaise with the university about the student’s ability to continue with placement. Students may be required to discuss their sick leave with the Course Coordinator or Program Director if success in the course is at risk.

Additional days cannot be arranged for students who miss placement. Students who have been absent and not achieved the course objectives will receive a fail grade and will not have their placement extended.

- Negotiation for any leave will involve the student, clinical facilitator, academic liaison, course coordinator and program director (if required) considering the facilitator and (where relevant) placement RN preceptor feedback as well as records of student course and program progress, reliability and validity of assessments, reasons for missed days and other factors deemed relevant by course coordinators. Students who are not assessed as achieving the minimum standard for each competency skill area will fail the clinical assessment and therefore fail the course.

In this eventuality students are able to make an ‘Application for Amendment to Enrolment and Fees in Special Circumstances’ and so should speak with an academic staff member.

The assumed student workload is as follows:

For a 4.5 unit course (Stage 2 clinical courses)
1. 4 hour preclinical workshop on-campus in the Horizon Hospital and Health Service
2. 4 weeks (160 hours) of clinical placement
3. 4 hour post-clinical workshop on-campus or via virtual classroom

For a 9.0 unit course (Stage 3 clinical courses)
1. 1 day or 2 day preclinical workshop on-campus in the Horizon Hospital and Health Service
2. 8 weeks (320 hours) of clinical placement
3. 8 hour post-clinical workshop on-campus or via virtual classroom

Student Rosters & Shifts

In all clinical courses students are required to attend placement for 5 shifts per week, over 7 days (including public holidays at the discretion of the department manager), for the placement period and rostered on early, late and night duty shifts as per the shift times of the venue.
Administration of S8 and IV Medications

SA Health policy dictates that students MAY NOT administer S8 medications. They are however permitted to be the THIRD responsible person (with two Registered Nurses) who checks/witnesses the S8 administration. Many venues do not allow students to undertake this role and so the venue policy must be followed in these circumstances.

There have been many changes recently to student involvement in checking and administering medications. Please see Appendix B for details on venue policy.

4.10 Policy Statements for Courses with Clinical Placements

(This Information is Included in Course Outlines)

UniSA Assessment Policies and Procedures has particular relevance for clinical placements:


Section 4.1.3 of this policy states:

Students undertaking a practice-based learning activity are required to:

a) comply with the rules and regulations of the organisation with which they are placed
b) comply with relevant professional codes of ethics
c) demonstrate the highest standard of honesty, integrity and social responsibility

As part of this policy students need to adhere to the following subsections of this policy:

Medical fitness and suitability for placement - Students may be required to present medical certification of fitness/suitability in order to undertake placement. See section 4.2 for details.

Unsatisfactory performance in a practice-based learning activity as outlined in section 4.5.1 of the policy:

Unsatisfactory performance may include one or more of the following:

a) failure to meet the assessment requirements as explained in the course outline
b) failure to comply with the provider’s professional standards and workplace requirements
c) incomplete or late submission of documents related to the practice-based learning activity
d) failure to discuss critical incidents or issues of concern with the supervisor or course coordinator.

The Division of Health Sciences Clinical Placement Policy provides information to students with respect to enrolment in a clinical course and acceptance of a clinical placement.


4.11 Misconduct During a Practice-based Learning Activity

Refer to section 4.6 of the policy.

4.6.2 If a course coordinator, supervisor or provider of a practice-based learning activity identifies a student whose:

a) behaviour during the activity may contribute to risk of harm or injury to self or others, or
b) behaviour may constitute misconduct under Statute 7 of the University of South Australia Statutes, or
c) actions may involve academic misconduct as prescribed in Section 9 of this Manual

the student will be required to meet with the course coordinator and/or academic integrity officer. If the student is unable to attend in person, they may participate via email or phone /internet telecommunications.
4.12 Behaviours That May Result In Students Being Suspended From Placement

In line with the above misconduct policy, where a Clinical Facilitator identifies a student is:

- Behaving in a way that may contribute to risk for self, clients and/or the placement provider.
- Behaving in a disorderly, disruptive or offensive manner.

The Clinical Facilitator must notify the Academic Liaison or the Course Coordinator of the student’s misconduct as soon as possible and arrange for the student to have an interview with the Academic Liaison/ Course Coordinator. Where a student has demonstrated the potential to cause harm while on placement, the student may be immediately suspended from placement pending the outcomes of the interview with the Academic Liaison/Course Coordinator.

Students behaving in a disorderly or offensive manner are to be required to leave the placement premises until the best action is decided by the Academic Liaison/Course Coordinator.

As per the University Assessment Policies and Procedures, the Course Coordinator is responsible for the coordination of investigations of alleged behaviours resulting in suspension from placement.

4.13 Managing a Grievance

All levels of dispute are to be managed in a professional and timely manner. Where the dispute relates to a difference of opinion (as opposed to harassment or discrimination) it is recommended that the individual concerned should organise a time to speak to the specific person involved. Depending on the nature of the concern the individuals may all wish to utilise support from others. In the student’s case it is usually the Clinical Facilitator.

Students are advised that if they have an issue with the Clinical Facilitator and are dissatisfied with the response, they should initially contact their specific Academic Liaison or the Course Coordinator.

If such issues or concerns are not resolved with this process students are advised to make an appointment with the Program Director as soon as possible to minimise the negative impact on their progress through the course.

4.14 Students Accidents and Incidents While on Clinical Placement

Clinical Facilitators need to assist students who are injured whilst on clinical placement to do the following:

- Check student has obtained treatment for their injury.
- Students must inform their Clinical Facilitator as soon as is practicable. The Clinical Facilitator will then inform the Academic Liaison.
- Clinical facilitator to inform the Clinical Nurse Consultant/Nurse Manager of the incident and complete any necessary accident incident requirements for the health care organisation, not the venue’s Work Cover forms.
- Complete and return to the Academic Liaison and/or Course Coordinator the University ‘Student Placement/Field Trip Incident Report’ FS24 form within 24 hours of any incident.


The ‘Student Placement/Field Trip Incident Report’ FS24 form also needs to be completed where a student is involved in a situation that is reported through a placement venue incident reporting processes (e.g. AIMS, incident reporting).

Further risk insurance details are available at:

When obtaining treatment for injury, students should be aware of the following:

- Students are not covered under the SA Return to Work Act 2014 and do not receive workers compensation entitlements. Students are therefore advised not to complete Work Cover claim forms.
- Students are advised that they can avail of the student insurance policy, whereby any out of pocket expenses (after using Medicare and their international insurance policy) from clinical placement incidents exceeding $50 will be paid via student insurance. Refer to the following link for further details http://w3.unisa.edu.au/fin/Commercial_Support/Insurance/Student_Insurance/student_insurance.asp
Alternatively students can attend the UniSA Health Medical Clinic at City East campus to be treated if unable to get to own GP in a reasonable time. If students are covered by Bupa or Alliance they don't have to pay anything. If they are covered under any other provider they can pay upfront and claim from their insurance later. The link to the clinic is [http://www.unisamedical.com.au/](http://www.unisamedical.com.au/)

As a requirement of the SA work health and Safety Act 2012 every accident/injury to University staff, students, visitors, contractors and voluntary helpers must be reported, irrespective of its seriousness, using the relevant WHS hazard and incident reporting procedure.

### 4.15 Protecting Students While on Clinical Placement

Students while on placement are potentially vulnerable and it is the Clinical Facilitators responsibility to notify the Academic Liaison of any incident or concern where the student is or potentially could be compromised. Such circumstances may include:

- Participant or witness to a critical incident that may/has resulted in a report or investigation.
- Witness or be a victim of bullying, sexual harassment or other unacceptable behaviours by staff, clients or members of the public.
- Being asked to work in an environment with unsafe or inappropriate standards of practice.

Clinical Facilitators are responsible to act in order to protect students in situations or threat or compromise. All accusations and evidence of compromising behaviour must be reported to the Academic Liaison and acted on per contemporary workplace policy standards. University counsellors and or academic counselling should be instigated if required. The University ‘Student Placement/Field Trip Incident Report’ FS24 should be completed for any incident that may result in the Universities legal department being involved in both the short and long term. FS24 form located on the clinical facilitator resource website or via [https://lo.unisa.edu.au/mod/url/view.php?id=537272](https://lo.unisa.edu.au/mod/url/view.php?id=537272) Advice should be sought from the Academic Liaison if you have any concerns.

## 5 CLINICAL PLACEMENT EVALUATION

### 5.1 Course and Program Evaluation Processes

The University has a process for evaluating all programs, courses and for teaching on campus ([myCourseExperience](https://lo.unisa.edu.au/mod/url/view.php?id=537272)). Clinical placement education activities are evaluated within the course component of this process.

### 5.2 Evaluation Undertaken by Individual Clinical Facilitators

Clinical Facilitators are encouraged to evaluate their own teaching performance.

### Professional Resources

The Australian Nursing and Midwifery Accreditation Council (ANMAC) in their previous organisational role had developed a Professional Practice Framework made up of competency standards and codes. These are standards, codes and guidelines are now endorsed by the Nursing and Midwifery Board of Australia (NMBA) to provide guidance to the professions. The current versions are available from the Australian Nursing and Midwifery Accreditation Council (ANMAC) [http://www.anmac.org.au](http://www.anmac.org.au) or Nursing and Midwifery Board of Australia [http://www.nursingmidwiferyboard.gov.au](http://www.nursingmidwiferyboard.gov.au/)

Key documents relevant to clinical facilitation of students include the following:

These also help to clarify our views and expectations on a range of issues.

- Guidelines and Assessment Frameworks for Registration Standards
- Professional Practice Guidelines
- Nursing and Midwifery - Guidelines for Mandatory Notifications
- Nursing and Midwifery Guidelines for Advertising of Regulated Health Services
- Competency Standards
- RN Competency Standards August 2006
- Code of Ethics and Professional Conduct
- New Code of Ethics for Nurses August 2006
- New Code of Professional Conduct for Nurses August 2006
- Principles for the Assessment of National Competency Standards
- Principles for the Assessment

Decision Making Framework
- National Framework for the Development of Decision-making Tools for Nursing and Midwifery Practice
- DMF A4 Nursing Summary Guide Final 2010
- DMF A3 Nursing Flowchart Final 2010
- DMF A4 Midwifery Summary Guide Final 2010
- DMF A3 Midwifery Flowchart - Final 2010

Professional Boundaries
- PB for Nurses - Final for web +PPF Watermark - March 2010

For mental health nurses specifically, the Australian College of Mental Health Nurses Inc. (ANZCMHN) also provides the following standard. The current version is available under the Publications link from their website: [http://www.acmhn.org/index.html](http://www.acmhn.org/index.html).

- Standards of Practice for Mental Health Nursing in Australia.
# Resources

<table>
<thead>
<tr>
<th>Name &amp; Contact</th>
<th>Areas of support</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinical Placement Unit</strong>&lt;br&gt;Division of Health Sciences&lt;br&gt;Room BJ2-03, City East Campus&lt;br&gt;University of South Australia.&lt;br&gt;Email: <a href="mailto:cpuoffice@unisa.edu.au">cpuoffice@unisa.edu.au</a>&lt;br&gt;Phone: (08) 8302 2214&lt;br&gt;Fax: (08) 8302 2830</td>
<td>Planning and coordination of ongoing CPU activities. Delegation and management of clinical placement needs for specific courses. Point of contact for seconded staff from health care venues.</td>
</tr>
<tr>
<td><strong>Academic Liaison</strong>&lt;br&gt;(use this space if you wish to record the details of your allocated person)</td>
<td>First contact for most student issues including advice about teaching and learning strategies performance concerns etc.</td>
</tr>
<tr>
<td>Name: ______________________________<em><strong>&lt;br&gt;Tel: (</strong></em>) ______________________________&lt;br&gt;Email: ______________________________<em><strong>&lt;br&gt;Fax: (</strong></em>) ________________________________</td>
<td>Individual employment contracts and time sheets</td>
</tr>
<tr>
<td><strong>Human Resources</strong>&lt;br&gt;Division of Health Sciences&lt;br&gt;P6-29A (via Division Services)&lt;br&gt;<a href="mailto:HSC-casualsinhealth@unisa.edu.au">HSC-casualsinhealth@unisa.edu.au</a></td>
<td></td>
</tr>
<tr>
<td><strong>Administrative Office</strong>&lt;br&gt;School of Nursing &amp; Midwifery&lt;br&gt;University of South Australia&lt;br&gt;Phone: (08) 8302 1832</td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX A: GUIDE TO WRITING LEARNING OBJECTIVES

A **learning objective** is a statement that makes explicit a measurable achievement resulting from specific learning activities within a definite time span. When you write a learning objective it needs to contain 3 main elements. It needs to state clearly the:

- **Performance** - what is to be achieved?
- **Criterion** - standard to be achieved.
- **Conditions** including time span.

Use the S.M.A.R.T. framework so that your learning objective is specific, measurable, achievable, realistic and has a timeframe.

<table>
<thead>
<tr>
<th>SPECIFIC</th>
<th>A learning objective should specify clearly WHAT you want to achieve. A learning begins with an action verb like:</th>
<th>Questions to help you think about this:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>- What exactly am I going to achieve?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- What strategies have I identified?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Is the objective clear and understandable?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Have I used an ‘action’ verb (examples below)?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Is it clear what needs to happen?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Is the outcome clear?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Will this objective lead to the desired result?</td>
</tr>
<tr>
<td>MEASUREABLE</td>
<td>A learning objective should be about developing new knowledge and make clear how your progress can be measured.</td>
<td>How will I know that I have achieved my learning goal? How can the changes be measured?</td>
</tr>
<tr>
<td>ACHIEVEABLE</td>
<td>A learning objective must be possible to achieve both in terms of your role (student nurse) and the amount of time on placement.</td>
<td>Can I achieve this objective within the stated timeframe? Have I considered any limitation or constraints? Can I achieve this objective by using the resources that I have identified? Is this objective possible?</td>
</tr>
<tr>
<td>REALISTIC</td>
<td>A learning objective must be realistic in terms of the resources you have available to you as a student.</td>
<td>Do I have access to the resources that I need to achieve this objective? Do I need to review my learning needs or adjust my learning objective? Is this objective possible to achieve?</td>
</tr>
<tr>
<td>TIMEFRAME</td>
<td>A learning objective must include a timeframe for when a measurement can be taken to show progress and it must take account of the time frames possible during your placement.</td>
<td>When will this objective be accomplished? Is there a stated deadline for achieving this objective? Is this objective achievable in the timeframe stated?</td>
</tr>
</tbody>
</table>

**Writing a Learning Objective**

When you write the learning objective avoid vague verbs that are hard to measure like: appreciate, become familiar, be aware of, explore further know about, perceive, realise, understand. You cannot really provide evidence that can be measured with these kinds of verbs. Here is a short list of some appropriate verbs that you could use:

<table>
<thead>
<tr>
<th>Administer</th>
<th>Analyse</th>
<th>Apply</th>
<th>Compile</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct</td>
<td>Construct</td>
<td>Create</td>
<td>Create</td>
</tr>
<tr>
<td>Demonstrate</td>
<td>Develop</td>
<td>Evaluate</td>
<td>Express</td>
</tr>
<tr>
<td>Implement</td>
<td>Incorporate</td>
<td>Organise</td>
<td>Produce</td>
</tr>
</tbody>
</table>
Examples of well written learning objectives with the 3 elements

**Example 1:** To administer medications in a competent and safe manner for all allocated clients by week 2 of placement.

<table>
<thead>
<tr>
<th><strong>Learning objective elements</strong></th>
<th><strong>Student example 1</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance or skill</td>
<td>To administer** medications</td>
</tr>
<tr>
<td>Criterion or standard</td>
<td>in a competent and safe manner</td>
</tr>
<tr>
<td>Conditions, including timeline</td>
<td>for all allocated clients by week 2 of placement</td>
</tr>
</tbody>
</table>

**Example 2:** To safely administer** medications adhering to venue legal requirements and the 8 rights of medication administration under supervision of an RN throughout the duration of the placement.

<table>
<thead>
<tr>
<th><strong>Learning objective elements</strong></th>
<th><strong>Student example 2</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance or skill</td>
<td>To safely administer** medications</td>
</tr>
<tr>
<td>Criterion or standard</td>
<td>adhering to venue legal requirements and the 8 rights of medication administration under supervision of an RN</td>
</tr>
<tr>
<td>Conditions, including timeline</td>
<td>throughout the duration of the placement</td>
</tr>
</tbody>
</table>

**active verb**

**Comment:** These examples fit the SMART framework – the student can easily demonstrate that she/he administered medications by being observed and having these activities documented by the RN by week 2.

Examples of poorly written learning objectives

1. To communicate effectively with team members in order to manage time effectively to provide appropriate evidenced based care.

   **Comments:**
   - Performance / what is to be achieved is provided but there is not an appropriate active verb
   - Criterion / standard to be achieved is not provided
   - Conditions including time span are not provided
   - Overall, there is no measurable way (criterion) shown for demonstrating ‘effective’ communication and there is no clear indication of how and when the measurement was to take place. There is not a clear link between managing time effectively and communicating effectively. Finally, ‘to provide appropriate evidenced based care’ could be used as the first few words of a new learning objective.

2. Conduct an accurate patient handover to the student group in order to further develop the knowledge and skills of myself and others by weeks 3 and 6.

   **Comments:**
   - Performance / what is to be achieved is provided
   - Criterion / standard to be achieved is not provided (how will ‘accurate’ be judged?). The conditions are vague and expressed as a reason rather than an outcome.
   - Conditions including time span is provided
   - Overall, there is no measurable way (criterion) shown for demonstrating ‘effective’

3. Wherever possible further develop my knowledge and skills in order to provide effective, evidenced based nursing care for the duration of placement.

   **Comments:**
   - Performance / what is to be achieved is provided but it is now clear what area of knowledge and skills are to be the focus. To say ‘further develop’ is not useful unless the student makes clear what the starting point is.
Criterion / standard to be achieved is not provided

Conditions are not clear but there is a time span of the whole placement – does this mean that the judgement is to be made on the last day?

Overall, there is no clearly measurable way (criterion) shown for demonstrating ‘development’. There is also no clear indication of what knowledge and skills are to be focused on and what area of ‘evidenced based nursing care’.

4. Develop and conclude effective therapeutic relationships with patients presenting with mental health issues to aid in preventing agitation and aggression, in consultation with a registered nurse by week six.

Comments:

Performance / what is to be achieved is provided but there is not an appropriate active verb

Criterion / standard to be achieved is not provided

Conditions including time span are not provided

Overall, there is no measurable way (criterion) shown for demonstrating the ‘effectiveness’ of therapeutic relationships. What will be demonstrated is not specific.
APPENDIX B: ROLE OF THE NURSE, NURSING STUDENT AND ASSISTANT IN NURSING IN MEDICATION MANAGEMENT PROCEDURE

Currently under review February 2016

1. **Refers to students practicing in Northern Adelaide Local Health Network (NALHN) venues (covers Modbury, LMH, GHS and associated community venues)**

Section 5.10 [Undergraduate Nursing] of the procedure outlines the role of nursing students.

Please note: The supervising RN retains accountability for the delegated actions of the Undergraduate Nursing Student with regard to medication management.

**Undergraduate Nursing Students:**

- May ONLY administer Non-injectable/Non-controlled Substance medication with DIRECT continuous RN supervision.

This means all non-injectables require direct supervision. That is the student is never to administer non-injectable medication without being supervised i.e. if administering oral medication that would require only one qualified nurse to administer then the student is to be directly supervised.

- May ONLY function as a third person in the process of checking and administering any INJECTABLE medication for administration via the epidural, Intrathecal, intravenous, intramuscular, subcutaneous routes.

This means that students function as the third person, they do not replace the NALHN employee in the checking/administering process. Any injectable requires two NALHN nurses however the student can be the third person.

- Play NO role in the preparation, administration or disposal of Controlled Substances or infusates that contain Controlled Substances.

No Change from previous practice.

2. **Refers to students practicing at the Flinders Medical Centre**

Clinical incidents related to drug administration at FMC have revealed common themes:

- Interruptions during the preparation, checking and administration processes;
- Involved inexperienced staff (i.e. Graduate nurses and student nurses); and
- Occurred in high acuity clinical areas

Adjustments in 2013 to the Medication Administration procedure include:

- All medications for administration via a line (nasogastric tube, PEG, IV, PICC, CVC, Swan Ganz, Vas Cath, Porta Cath and any other central line excluding arterial lines), **must be checked, prepared and administered by two nurses**, one of whom must be an FMC employee for more than two years.

- If the patient requires medication via more than one line, then each medication must be checked, prepared and administered **as separate process** to avoid giving via the wrong line.

A Medication Review has commenced and will involve consultation and review of all procedures and processes associated with medication checking, administration and management and subsequent education and implementation.

In summary student nurses currently (at January 2013):

- Are **not** permitted to check, prepare or administer medications via 'lines' (as above). (This will be reviewed and is likely to contain statements that students under the direct supervision of a RN (who will be one of the two nurses can check, administer but will only occur after the changes have been endorsed as part of the current consultation and review process).
- Are **not** permitted to check any medications as the second person as they are not qualified
- Are **not** permitted to check any paediatric medications
"The CALHN (TQEH and RAH) directive is that 2nd year students are NOT to administer IV medications at all. They can maintain intravenous fluids but again cannot place any additives into that fluid. Any IV medications can only be done as a 3rd year student." Currently under review February 2016

### VISUAL GUIDE ONLY Nursing Roles in Medication Management

The individual nurse is responsible and accountable for their own practice and to be to be cognisant of TQEH medication policies and procedures. When delegating the onus is on the Registered Nurse to identify the individual nurse's level of education and competence.

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**Schedule 4 Medications**

- Chemotherapy
- Non Parenteral
- Subcut and IM
- Intravenous
- Continuous SQ Infusion

**Schedule 5 Medications**

- Non Parenteral
- Subcut and IM
- Intravenous
- PCA Infusion
- Epidural Infusion
- Intrathecal Infusion

If UNSURE do NOT Administer

Reference Documents:
- ANMC Delegation and Supervision for Nurses and Midwives
- SA Legislation and Drugs and Alcohol
- ANMC Nursing Practice Decision Flowchart (Context)
- TQEH Clinical Practice Manual – Nursing Medication Management

© [IIT Clinical Education August 2007 Revised November 2012](#) Direct requires consultation with TQEHE Clinical Education Centre.
**APPENDIX C: CLINICAL FACILITATOR CONTACT FORM 1**

This form is to be kept as a record of learning outcomes and support provided to individual students while on clinical placement. Please include all times spent either directly with the student, or activities undertaken on their behalf. Completed documents will be kept by the School of Nursing and Midwifery.

**Student Name ___________________________ ID No. ___________________________**

**Contact Details (mobile/home phone) ___________________________**

**Clinical Venue ___________________________**

**Organisation ___________________________**

**Ward/Dept ___________________________**

**Program ___________________________ Course ___________________________**

**Date of Clinical Placement - From: ___________________________ To: ___________________________**

**Clinical Facilitator (provided by UniSA) ___________________________**

**Clinical Facilitator (provided by Organisation) ___________________________**

**Preceptor (provided by Organisation) ___________________________**

**Roster: (E=Early; L=Late; N=Night)**

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**APPENDIX C: CLINICAL FACILITATOR CONTACT FORM 2**

Student Name ________________________________________________  ID No. ____________________________
Clinical Facilitator ______________________________________________

<table>
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<tr>
<th>Date and Time</th>
<th>Notes regarding activities and student progress</th>
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### APPENDIX D: SUMMARY SHEET

**Clinical Facilitator:**

**Course:** NURS 3042 Extension to Practice Practicum 4

**Dates of Placement:**

**Completed document to be sent via email weekly to relevant Course Coordinator**

<table>
<thead>
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<th>Student Name</th>
<th>Placement</th>
<th>Student leave days (this week)</th>
<th>Student leave days (total to date)</th>
<th>CF/Student leave days (number)</th>
<th>CF/Student leave days (number)</th>
<th>Clinical challenge</th>
<th>Progress satisfactory</th>
<th>Y/N</th>
<th>A/I</th>
<th>A/I contact required</th>
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<th>If progress unsatisfactory, please provide details</th>
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APPENDIX E: CLINICAL COMPETENCY ASSESSMENT INFORMATION SUMMARY DOCUMENT – 4 & 8 WEEK PLACEMENTS

This document corresponds to 'Clinical Competency Assessment - Information for Students’ (students have this document with them) and is a guide to assist you with understanding the requirements the students need to achieve and complete.

- **What does the student need to do before Placement?**

Before students commence their placement, they are required to:

1. Print off the NCAS/UniSA Clinical Assessment Tool
2. Review the ANMC National Competency Standards for the Registered Nurse (on page 2 of the NCAS/UniSA Clinical Assessment Tool)
3. Document where they think their practice is before the start of their placement?

The assessment tool is complex and they are expected to review each of the Clinical Competency Areas to ensure they are clear of the expectations for their practice as a nurse in each area. If they are unsure of the document, they need to discuss it with their Clinical Facilitator at the first meeting.

- **WEEKS 2, 4 & 6 (Formative Assessment – relevant to 4 or 8 week placement)**

**Please note that the formative assessments vary between ELA 4 & ELA 5. Please refer to your relevant Course Coordinator for required assessments.**

1. Students to meet with their Clinical Facilitator by the end of week 2.
2. Before the meeting the students need to go through the NCAS/UniSA Clinical Assessment Tool and focus on the competencies section. They need to reflect on their current practice and assess where they believe their competency level sits between Independent and Dependent.
3. To be filled out in pencil (tick column) and brought to the meeting with their Clinical Facilitator.
4. At the Formative Assessment meeting the competencies will be discussed between the student and Clinical Facilitator regarding the student’s current competency level.
5. The NCAS/UniSA Clinical Assessment Tool will be marked by the Clinical Facilitator with a letter F (Formative) in each of the competency columns.
6. Students will also be required to write a small reflection statement at the end of each individual competency area. They are required to leave room for their summative reflection that will be written at the end of week 4 or week 8 relevant to placement.
7. The student’s reflection statements can be written before their meeting if negotiated with the Clinical Facilitator.

- **WEEK 4 or 8 (Summative Assessment – relevant to 4 or 8 week placement)**

1. The final assessment for the student’s placement will be completed at the end of week 4 or 8.
2. Students need to make a meeting time with their Clinical Facilitator and again bring the NCAS/UniSA Clinical Assessment Tool.
3. This assessment will be carried out in conjunction with the Clinical Facilitator and with input from the RN’s that the students have been working with over the 4 or 8 week placement.
4. At the meeting each competency area will be reviewed again and the Clinical Facilitator will assess the student’s competency level at the completion on their placement.
5. The NCAS/UniSA Clinical Assessment Tool will be marked by the Clinical Facilitator with a letter S (Summative) in each of the competency columns. These are the students FINAL GRADES for the Placement.
6. Students are required to write a reflection statement after each competency area. This will be documented after each of their formative reflection statements written in week 2, 4 & 6 (relevant to 4 or 8 week placement).
7. The Clinical Facilitator will be required to transcribe the final summative results from the Initial and Ongoing Assessment of a Client-Patient Employer Competencies section to the Nursing Competency Schedule (2 page documents at the start of the Assessment Tool).
8. Students will be required to write a reflection statement in the section provided on this document. The Clinical Facilitator will also write a final statement regarding the student’s placement.
On Completion of the Placement

On completion of week 4 or 8 (relevant to placement), students will need to have:

1. The NCAS/UniSA Clinical Assessment Tool completed with signatures and dates from the Clinical Facilitator.
2. Written comments students have gained from RN’s they have worked with throughout their placement are also signed and dated.
3. The Clinical Facilitator will transcribe all final results from the Initial and Ongoing Assessment of a Client-Patient Employer Competencies to the Nursing Competency Assessment Schedule. This is the two page document at the beginning of the Assessment tool.
4. Students are required to write a final reflection statement on this document.
5. Students are responsible to upload the NCAS/UniSA Clinical Assessment Tool to their e Portfolio.
6. The Clinical Facilitator will email the Nursing Competency Assessment Schedule (NCAS) to the Course Coordinator of the ELA program who is responsible for entering student's final grades into gradebook on the completion of their placement.