

School of Nursing & Midwifery





Bachelor of Nursing (BN) Guide for Clinical Facilitators and Preceptors



INTRODUCTION TO THESE GUIDELINES

Clinical Placement is an essential and fundamental component of the Bachelor of Nursing program. Our nursing students regard their clinical placements as a highlight of their education. We value the relationships we foster with health care providers in which our students are placed. We need their support and cooperation and expect all Griffith employed staff to work collaboratively and respectfully with our industry partners.

We respect your knowledge, experience, and enthusiasm. As a Clinical Facilitator or Preceptor, your support of students on their clinical placement is an essential and valued service.

This guide has been prepared to assist you in the role of Clinical Facilitator or Preceptor of our nursing students. It provides guidelines for assessment and processes to manage situations you may encounter. We recommend that you review this guide before every clinical placement.

If you are unsure about any of its contents, or aspects of the role, please seek clarification by contacting the Clinical Placement Coordinator on the campus where your students are enrolled. While it is our responsibility to provide you with the necessary information, it is your responsibility to access and use the resources provided, and notify the appropriate staff within the School of Nursing and Midwifery, if you become aware of any difficulties.

We hope you will find the information helpful and wish you the very best during your association with our students.

Directors of Undergraduate Program (Nursing) and Clinical Placement On behalf of BN Teaching and General Staff School of Nursing and Midwifery Griffith University

Acknowledgments

This document incorporates information from previous BN Clinical Practice Policies. Special thanks to: Clinical Practice Office staff, SONM BN Course Convenors, SONM Deputy Program Directors and the Director of Undergraduate Programs (Nursing) for their contributions to this document.

Updated information

This document is updated annually. In the unlikely event of the information in this document conflicting with University policy, University policy will be upheld.

For ease of use, the guideline has been colour coded and divided into 7 parts. These are:

BACHELOR OF NURSING PROGRAM
 CLINICAL PLACEMENT AND RESPONSIBILITIES
 EMPLOYMENT CONDITIONS
 HELPFUL TIPS FOR CLINICAL FACILITATORS
 ASSESSMENT ON CLINICAL PLACEMENT
 CHALLENGES ON CLINICAL PLACEMENT

7. APPENDIX

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<u>Glossary</u>

ANSAT	The Australian Nursing Standards Assessment Tool. Used in the assessment of clinical performance. <u>www.ansat.com.au</u>
BN	Bachelor of Nursing degree.
BN Deputy Program Director	The academic responsible for providing program advice during the Bachelor of Nursing Program located at each campus.
BN Program Director	The Director of Undergraduate Programs (Nursing) is the senior academic who has overall responsible for the

implementation, governance and quality of the Bachelor of
Nursing Program.

Buddy/Practice Partner/Registered Nurse	Registered or enrolled nurse/s that may be assigned to work alongside the student during clinical placement.
Clinical Course Coordinator (CCC)	The academic who coordinates a clinical course and has responsibility for all assessment, including clinical placement, within a given course.
Clinical Facilitator (CF)	A Registered Nurse responsible for coordinating student learning and assessment within the facility. The Clinical Facilitator liaises closely with practice partners, ward staff, the student and the Clinical Course Convenor.
Facility	The health agency or organisation that hosts the clinical placement (eg. Gold Coast University Hospital).
Clinical Learning Plan	If there is an occasion on clinical placement when a student's performance is not reaching the expected standard, then a Clinical Learning Plan will be negotiated. The Clinical Learning Plan is a tool that the Clinical Facilitator/Preceptor, in collaboration with the student and Clinical Course Convenor use to guide and support the student to achieve the appropriate outcomes on clinical placement.
Clinical Placement Coordinator (CPC)	The academic member of the Griffith University Clinical Placement Office who is responsible for the coordination of clinical practice including relationships with facilities, training of facilitators and overseeing student placements. A CPC is located on each campus.
Clinical Placement Director	The Senior academic within the Clinical Placement Office who has overall responsibility for all activities within the Clinical Placement Office, including recruitment and management of Clinical Facilitators.
Clinical Placement Officer (PO)	The administrative member of the Clinical Placement Office who is responsible for the allocation of student placement under the supervision of the Clinical Practice Coordinator, in consultation with the Clinical Course Convenor and the Deputy Program Director.

Preceptor	A preceptor is a Registered Nurse that a student is assigned to for the whole (or part of) a clinical placement as part of the 'Preceptor Model'. During a preceptored placement you may be assigned to a small group of preceptors who will be responsible for assessment in this model and liaises closely with other ward staff, the student and the Course Convenor.
Scope of Practice document	The document created by SONM that highlights assumptions about learning, student expectations of the placement experience, student responsibilities for learning in the clinical area and limitations for students of each year level.
SONIA	Sonia is the database in which all placements are allocated. Students can find all information related to their placements (eg. time and date, placement facility details and pre-brief). Students review and complete their ANSAT (assessment tool) on Sonia, as well as keep track of and upload all relevant mandatory requirements as directed by the Fit for Placement office. Additional documents required by the University (such as medical certificates and Statutory Declarations) are also uploaded to Sonia. Clinical Facilitators complete the student's ANSAT on Sonia.

See the <u>Fit for Placement</u> website.

1. BACHELOR OF NURSING PROGRAM

The aim of the Bachelor of Nursing (BN) program is to produce graduates who are safe, competent and confident Registered Nurses, able to engage locally and globally. The themes scaffolded through the program are based on the premise that high quality care is always:

- Client and family focused
- Driven by information and based on evidence
- Organised for quality and safety

The Bachelor of Nursing award is granted following the successful completion of six full time semesters of study (or part-time equivalent) including all clinical components (240 credit points). Graduates are eligible for registration with AHPRA in Australia.

AHPRA website: <u>https://www.ahpra.gov.au</u>

NMBA website: http://www.nursingmidwiferyboard.gov.au

1.1 Curriculum updates

The year 2016 marked the commencement of the 2016 – 2020 Curriculum, beginning with first year students. In January 2017, Griffith University introduced a <u>trimester model</u> of teaching. Trimesters are commonly termed: T1, T2 and T3. A new curriculum is currently being developed and will commence for first year students in 2022.

1st year: Foundations of Safe and Effective Nursing

Students learn the language of nursing and begin to experience what it is to be a Registered Nurse. The clinical focus is on key concepts that underpin the practical role of the nurse such as health assessment, effective communication, patient safety and teamwork.

• 1809NRS Effective Nursing Practice - 2 weeks clinical placement (T1)

2nd year: Client and Family Focused Nursing Care

The emphasis is on reinforcing technical knowledge, skill and attributes of nursing. The clinical focus is on clinical decision making for clients with a range of acute and chronic conditions.

- 2803NRS Acute Nursing Practice 4 weeks clinical placement (T1)
- 2807NRS Chronic Illness Management 2 weeks clinical placement (T2)
- 2809NRS Mental Health Nursing Practice 2 weeks clinical placement (T2)

3rd year: Delivering and Coordinating High Quality Care

Students develop advanced clinical decision-making skills and the capacity to delegate, supervise and educate more junior team members.

- 3803NRS Complex Clinical Nursing 2 weeks clinical placement (T1)
- 3804NRS Community Nursing Practice 2 weeks clinical placement (T1)
- 3807NRS Clinical Decision Making 8 weeks clinical placement (T2)

Details of the BN Program (including full course profiles) can be accessed via the Griffith website:

2. CLINICAL PLACEMENT AND RESPONSIBILITIES

Students enrolled in the Bachelor of Nursing (BN) program undertake several clinical courses during the program. Clinical placement in an appropriate health care facility or service area is a requirement of each clinical course.

A Course Convenor on each campus oversees and coordinates the delivery of content, and oversees student performance for each course. For clinical courses, this includes overseeing student performance on clinical placement. The Clinical Course Convenor is your <u>first point of call</u> if you are concerned that a student is demonstrating a deficit in their practice or theoretical knowledge (please see Section 5.4). In collaboration with the Clinical Course Convenor and the student, a plan to support the student may be implemented.

The Clinical Placement Office staff coordinate the clinical placement of students and support the Clinical Course Convenors in their role.

ACADEMIC STAFF

Program Director

• Responsible for the quality and delivery of the BN program

BN Deputy Program Director

- Responsible for the quality and delivery of the BN program on each campus
- Works collaboratively with Program Director, Course Convenors and Clinical Practice Office staff.

Clinical Course Convenor

- Manages the academic progress of students enrolled in their course
- Communicates with health care facilities and supervisory staff during clinical placement
- Advises and assists with any knowledge and learning deficit issues
- Guides and directs the progress of student management issues, such as Formative Reviews.

CLINICAL PLACEMENT OFFICE STAFF

Director of Clinical Placement (DCP) – responsible for:

- Developing and maintaining effective clinical education partnerships locally, nationally and internationally to secure high-quality, student-centred, fiscally responsible and efficient clinical placements for the School of Nursing and Midwifery
- Ensuring clinical placements meet the learning outcomes of courses and curriculum in collaboration with the Course Convenors and Program Director
- Lead processes to systemically evaluate the student experience of clinical placement, and implement improvements leading to improved outcomes and efficiencies
- Overseeing the processes for recruitment, selection, professional development and management of Clinical Facilitators to improve the quality and retention of high- performing sessional staff

• Undertake teaching of undergraduate and/or postgraduate nursing courses and coordination of research within the clinical environment, as well as setting key performance indicators (KPI's) and providing strategic direction and operational leadership within the PPO team.

Clinical Placement Coordinator (CPC) – responsible for:

- Liaising with industry partners and securing placements for students
- Overseeing the allocation of clinical placements
- Liaising with industry partners regarding allocation of clinical facilitators / preceptors
- Engaging Clinical Facilitators and allocating clinical facilitation
- Co-ordinating Clinical Facilitator education, feedback and performance development
- Educating and advising in the use of ANSAT (Australian Nursing Student Assessment Tool)
- Advising and assisting with any professional practice issues
- Assisting with Formative Reviews when Course Convenor requests collaboration.

Placement Officer (Nursing) (PO) – responsible for:

- Allocating nursing students to clinical placement
- Administering the processes relating to clinical placement
- Forwarding placement information to the health care facilities and Clinical Facilitators
- Overseeing/checking all records entry related to students' placement
- Managing EOI's for rural/remote and prison health placements
- Liaising with CF and Preceptors re: ANSAT and placement information.

2.1 Communication

Please use the following generic email to communicate with the Clinical Placement Coordinators, in relation to clinical placements and administration inquiries:

sonmnursingcc@griffith.edu.au

Clinical Placement Office Key Personnel Contact Details					
Director of Clinical PlacementJudith NeedhamPhone: (07) 3382 1158					
	j.needham@griffith.edu.au	Mobile: 0407 698 694			
Academic Staff					
Clinical Placement Coordinator	Valda Frommolt	Phone: (07) 3382 1086			
(Logan Campus)	v.frommolt@griffith.edu.au	Mobile: 0466 562 291			
Clinical Placement Coordinator	Lynda Hughes	Phone: (07) 3735 5223			
(Nathan Campus)	lynda.hughes@griffith.edu.au	Mobile: 0409 482 967			

Clinical Placement Coordinator (Gold Coast Campus)	Danny Sidwell <u>d.sidwell@griffith.edu.au</u>	Phone: (07) 5552 9701 Mobile: 0434 171 916	
	Professional Staff		
Placement Officers (Nursing)	Judy Batkin	Phone: (07) 3382 1200	
Logan Office: L05_3.58 Nathan Office: N48_1.16 Gold Coast Office: G16_2.51	Debbie Mallitt Karen Carrington <u>nursingcpo@grfiffith.edu.au</u>		

As circumstance changes, so may these staff and positions. However, the generic emails will remain the same and your email will always be answered in a timely manner.

2.2 Models of Clinical Supervision

Various models are in use for supervising students on clinical placement:

- <u>Facilitator Model</u> A competent RN, independent of a particular workplace, oversees a small group of students (6-12).
- <u>Preceptor Model</u> An RN in the workplace works in partnership with one student for the duration of placement. Generally, the student will work the same shifts as the Preceptor throughout placement.

There are variations or hybrids of these models such as the **Integrated Professional Practice Models (IPPM)** and **Cluster Model** whereby students work with RNs in the workplace with appointed "facilitators" or "clinical associate" staff who are responsible for co-ordinating and providing support for clinical staff in their role with students.

During the BN program, students may experience various models of supervision while undertaking clinical placement. Therefore, it is important that you understand your role, and clarify with students what that role is, what they can expect of you as a Clinical Facilitator or Preceptor and what you expect of them.

2.3 Clinical Facilitator Role

The Clinical Facilitator is an experienced Registered Nurse appointed to supervise, support learning, and evaluate undergraduate student nurses undertaking courses that include a clinical practice component. As such, the role of the Clinical Facilitator also includes the functions of supervisor, coach and mentor.

The primary role of the Clinical Facilitator is to:

- Act as a professional role model
- Be a guide and mentor to the workplace
- Act as an educator by:
 - assessing learning needs

- facilitating the learning experiences
- evaluating learning performance and outcomes.

The Clinical Facilitator is a Registered Nurse who has the following attributes:

- Displays a positive attitude and has a professional commitment to nursing
- Demonstrates effective interpersonal communication skills, a non-threatening approach, is flexible, open minded, has a sense of humour and a self-confident attitude
- Identifies and works within professional boundaries and maintains confidentiality
- Demonstrates clinical competence and evidence based practice
- Demonstrates problem solving, critical thinking and clinical reasoning skills
- Exhibits leadership qualities, role modelling and reflective practice
- Demonstrates the ability to introduce and interpret protocols, policies, and standards to assist learners in building the necessary skills for professional practice
- Demonstrates accountability in professional practice
- Participates in continuing education by engaging in in-service programs, conferences, independent study and reflection
- · Works collaboratively and respectfully within a team environment
- Demonstrates the ability to teach others by identification of learning needs, planning and evaluation of learning activities.

The responsibilities of the Clinical Facilitator are:

- To ensure they are familiar with the students' course requirements and expected learning outcomes
- To ensure they meet mandatory requirements for the clinical workplace and are prepared for placement, including facility orientation
- To ensure students are welcomed and valued by introducing them to the rules, customs, culture and norms of their co-workers and workplace
- To understand the relevance of the student's background and learning needs
- To ensure students have completed their learning goals at the commencement of placement
- To assist the students to become familiar with the work environment including: physical facilities, ward procedures and policies, patient allocation processes and meeting permanent healthcare facility staff
- To promote competence in clinical practice by:
 - Motivating and encouraging enthusiastic behaviour
 - Provide access to learning opportunities that meet clinical objectives
 - Promoting theory to practice links
- To demonstrate and supervise practice of clinical skills
- To monitor theoretical and clinical progress on a regular basis
- To act as a resource person
- To recognise and effectively manage interpersonal difficulties and mediate where necessary
- To encourage and support independent growth

• To work in collaboration and cooperation with facility and Griffith University education and clinical staff.

Representing Griffith University

Clinical Facilitators represent the School of Nursing and Midwifery, Griffith University. Therefore, as both a representative of the University and as a role model for the nursing profession, it is very important that a high standard of professional conduct is maintained at all times.

Refer to the Griffith Code of Conduct at: <u>http://policies.griffith.edu.au/pdf/Code%20of%20Conduct.pdf</u>

Clinical Placement Expectations

On clinical placement and at any time within a healthcare facility aligned with the University, Clinical Facilitators are expected to adhere to the following requirements:

- Demonstrate a professional standard of behaviour in accordance with the Nursing and Midwifery Board (NMBA) Code of Conduct and Code of Ethics, as well as Griffith University Code of Conduct
- Demonstrate a professional standard of dress. There is no specific uniform requirement, however, professional work-wear is expected. Griffith University polo and cotton shirts may be purchased from the Griffith Shop on campus.
- Professional dress, jewellery, hair and appearance generally must align to that required of nursing students (ie. comply with all policies) (Appendix A).
- Griffith University ID badge must be worn and be clearly visible at all times (ID badges may be obtained from Student Services on any campus)
- Provide contact details to students and healthcare facility staff in each area
- Demonstrate a clear understanding of the Registered Nurse Standards for Practice (NMBA, 2016)
- Maintain clear communication with the Professional Practice Office and Clinical Course Convenors
- Maintain clear communication with facility staff during the clinical placement period.

2.4 Administrative and Clinical Mandatory Requirements

Clinical Facilitators are expected to provide a curriculum vitae (updated every 3 years) to the CPO.

To keep in line with current public and private industry partner guidelines, Griffith University requires that Clinical Facilitators provide the PPO with evidence of up to date clinical mandatory requirements (CMRs).

Clinical mandatory requirements include:

- AHPRA registration (Annual)
- CPR or ALS (Annual)
- Manual handling (Annual)
- National Police Check (valid for 3 years in acute settings or 12 months if working in aged care)
- Hand Hygiene (on commencement of first contract with Griffith University, then every 3 years)
- Blood Safe competency (on commencement of first contract with Griffith University, then every 3 years)
- Up to date immunisations in line with Queensland Health policy
- Complete Griffith University's Australia's First Peoples Cultural Awareness Module: <u>Beginning the Journey</u> (this is a mandatory requirement).

Please find helpful links below:

http://www.hha.org.au/learningpackage/olp-home.aspx http://www.bloodsafelearning.org.au/ http://www.nps.org.au/health-professionals/cpd/activities/online-courses/medication-safety-training (Note: CF's must complete all modules + the 2 case studies to obtain the final certificate. Submit final certificate only.)

In addition, it is now a requirement that all non-Queensland Health employed Clinical Facilitators working in a QHealth facility complete the following online learning prior to facilitating, then **annually** thereafter:

1. Read the Essential Placement Requirements for Students: http://www.health.gld.gov.au/employment/clinical-placement/requirements/studentorientation/default.asp

2. Complete the Student Orientation Checklist:

https://publications.qld.gov.au/dataset/student-deed-documentation/resource/e5d16a3f-ebcc-4c99-9499782e13a8ba65

3. Complete the Workplace Health and Safety Modules

Once the above activities have been completed, the Clinical Facilitator (Supervisor) is expected to complete and sign the <u>Supervisor Deed Poll</u>.

If you are having problems with LEO, more detailed instructions can be found in the <u>Fit for Placement</u> link (log on as a student).

Site Specific information

- The Royal Brisbane and Women's Hospital (RBWH) require CF's to undertake an additional Orientation Package. Information will be forwarded prior to placement, if allocated to that facility.
- Some facilities require the CF to be trained in ieMR.
- Hospital specific orientation is to be completed each calendar year by students. It is expected that CFs also ensure they familiarise themselves with site-specific orientation information.
- See the Non-Metro North declaration form.

There is a new process to upload mandatory requirements on SONIA. Please upload documents onto SONIA. Once you have uploaded your documents email Fit for Placement Office on <u>fitforpalcement@griffith.edu.au</u> to have your documents cleared. When you are emailing Fit for Placement Office please include your name, staff number and advise you are a nursing facilitator. Please follow the <u>How to Submit a Pre-Requisite Placement</u> <u>Document</u> or <u>watch the video</u>.

It is the responsibility of the Clinical Facilitator to ensure records are updated each year.

3. EMPLOYMENT CONDITIONS

Generally, Clinical Facilitators are employed on a casual basis from one to four week's duration each time. The Clinical Placement Coordinator (Logan) and/or the Clinical Director allocates Clinical Facilitators for placements across all three campuses with consideration given for preferred times and locations. However, a specific amount of work cannot be guaranteed. While every attempt is made to book placements in advance, last minute requests or unavoidable cancellations may occur due to unforeseen circumstances.

Clinical Facilitators are expected to be present for the whole time whilst nursing students are on site at a healthcare facility during clinical placement (except where specific agreement and details are in place). *It is not permissible for Clinical Facilitators to work for any other agency or facility during the hours they are engaged to facilitate students on clinical placement.* However, it is possible to work for another entity outside these hours but it is unacceptable to arrive late or leave placement early to attend another job.

Clinical Facilitators are required to give as much notice as possible if they are unable to attend their allocated clinical placement. Please contact the Clinical Placement Coordinator (Logan) by mobile phone (or email) for all Clinical Facilitator absences.

3.1 Clinical Facilitator Workshops

The School of Nursing and Midwifery supports professional development opportunities for staff to advance nursing practice. The Clinical Facilitator Workshops provide learning and skill development opportunities, program and industry updates as well as an opportunity to network and liaise with other Clinical Facilitators, academic staff and on occasion, industry partner staff. Updates and further information will be disseminated throughout the year as required and additional resources are available online through the Griffith SONM website at:

https://www.griffith.edu.au/learning-teaching/professional-development/sessional-staff

Clinical facilitators are considered an important part of the teaching team and we hope you find the information and resources helpful. Your feedback is most welcome and is used to inform improvements.

3.2 Payment Details

Clinical Facilitators are paid at a casual rate. This rate of pay incorporates loadings for costs associated with fulfilling the role, such as phone and Internet costs, as well as associated activities outside clinical placement hours. These may include, but are not limited to, healthcare facility visits prior to clinical placement, the completion of student assessments and any other documentation/reports, meetings with University staff as required, workshops and education sessions related to clinical placements. **Griffith University pays and schedules are completed online.**

3.3 Work Schedule and Pay Information

Clinical Facilitators are employed as Sessional Staff. All sessional engagement forms, employment information and payment advice is online. The following web links may be useful:

BN Guide for Clinical Facilitators and Preceptors 2020

Ask HR about Payroll – Sessional Staff: <u>https://intranet.secure.griffith.edu.au/university-administration/human-</u> resource-management/askhr/payroll-sessional-staff

3.4 Activating a Sessional Schedule

If you have been a student or previous employee of Griffith University, the Griffith ID number previously generated will be reactivated for you. Otherwise, Human Resource Management (HR) will generate an ID number. The following steps need to be worked through in order to activate this process:

- Provide your Griffith ID to Maree Dempsey, School Secretary Logan Campus or
- Provide your Date of Birth to Maree Dempsey if you require a new Griffith ID

A Sessional Schedule will be initiated on your behalf. This sets out the dates and hours you will be working and the pay rate assigned. To review and submit the Schedule for approval, you are required to follow these steps:

- Activate a password if you have not previously been employed by Griffith University or if your current password is not active
 - Contact Library and IT Help on +61 (0)7 3735 5555 who will generate a password
 - You will require your Griffith ID and some questions will be asked to verify your identity
- Login to the Griffith Portal www.griffith.edu.au/portal
- Username is derived by adding a lower case 's' to your Griffith ID and excluding any leading zeros; eg ID 0123456 becomes s1213456
- Password as initiated by IT Help or previously activated
- On the right hand side menu Click on *My Staff Page* link
- Click on the Time and Absence tile
- Click on the My Sessional Schedules tile
- Click on the "Create/View Schedule" button in the Currently Active Sessional Schedules grid for the appropriate
 - The Schedule will open in a new browser window (Ensure the pop-up blocker on the internet browser is disabled). Check all the details.
- Click 'Submit' at the bottom of the screen
- 'The Sessional Schedule was submitted successfully' message will appear
- Click OK
- Click 'Return' at the bottom of the screen and 'Logout' at the top right hand side of the screen.

If you have any queries or require assistance in relation to submitting your schedule, please contact HR Staff Services on 07 3735 4011, option 1.

If you have any questions or concerns about the schedule content, please contact Maree Dempsey on (07) 3382 1272 or <u>m.dempsey@griffith.edu.au</u>

3.5 Important Information

You will be engaged to work once the above process has been completed. You cannot be paid until the schedule has been submitted by you. You will receive an email to your Griffith University email address to advise that you have a schedule to submit. The hours you have been contracted are entered into the system in advance. Therefore, a reduction in hours or any absences will be in the system as a 'minus' value. These hours need to be submitted by you prior to the pay period cut-off date.

BN Guide for Clinical Facilitators and Preceptors 2020

4. SURVIVAL GUIDE FOR CLINICAL FACILITATORS

The PO staff will contact you with details of your placement allocation and Pre-Brief information. This is usually sent in email format but may be posted or accessed online through <u>Sonia</u> (online clinical placement database). The Clinical Placement Office endeavours to convey the information in a timely manner. However, the timeframe may vary as some student allocations and clinical placements can change quite close to the commencement date.

4.1 Prior to Clinical Placement

The Pre-Brief information contains:

- Name of the healthcare facility
- Clinical placement dates
- Meeting place and arrangements for orientation day
- Shift allocations
- List of the students attending placement
- Course summary and Scope of Practice document.

The following web link contains the documentation required on clinical placement: <u>http://www.griffith.edu.au/health/school-nursing-midwifery/programs-courses/work-placements/clinicaldocuments</u>

4.2 The Healthcare Facility

Healthcare facilities appreciate the Clinical Facilitators arranging a visit prior to the first day of clinical placement. It provides an opportunity to become familiar with the expectations and requirements of those concerned. The healthcare facility staff and the NUM in particularly, value a face-to-face meeting at a time when communication may be less disrupted. An orientation to unfamiliar areas is required to provide beneficial information including the location of resources and rooms and dining facilities, which assists the students in feeling expected and welcomed on the first day of placement. It is also important to be aware of the policies and procedures related to the facility and how to access them. Swipe cards or key codes are in place in some areas so prior knowledge is useful.

Students are also advised to visit the healthcare facility prior to placement so they are aware of parking arrangements and where they should meet on the first day of placement. However, they are not allowed to contact the facility prior to orientation day.

4.3 Orientation Day on Clinical Placement

Every healthcare facility has different arrangements and it is important to be cognisant of their expectations. Some facilities will not allow a student to continue the clinical placement if they are not present on Orientation Day. The prearranged meeting place is clearly stipulated on the Pre-Brief and everyone is expected to be present on time. The rest of the day will proceed accordingly to the local arrangements. However, the following points should be considered:

The Clinical Facilitator is expected to -

- Welcome the students to clinical placement
- Orientate the students to the facility, the area in which they are working, and the staff facilities for personal possessions, dining and rest rooms
- Introduce the students to the NUM and key staff in their placement area
- Provide the students with the facilitator's contact information and that of the healthcare facility as required
- Ask the students to provide the facilitator with contact details in case of an emergency
- Give clear guidelines regarding their expectations during the placement
- Ensure the students are aware of the facilitator's availability, the occasions for feedback and the debriefing sessions
- Ensure students have completed learning goals for placement.

Students are expected to -

- Be appropriately prepared for placement
 - Be appropriately dressed in full uniform, including wearing their ID badge at all times
 - Have completed all on line orientation, learning and requests outlined in the Pre-brief of the facility, and provided documentation as required.
- Be aware of the importance of and procedure for notifying any absences daily (Appendix B)
- Be aware of their Scope of Practice (Appendix C)
- Be aware of the importance remaining in their allocated areas other than for breaks or as directed, and the importance of attending their breaks in a timely and prompt manner
- Be aware of mobile phone arrangements, social networking precautions and confidentiality issues
- Provide the Clinical Facilitator with a goal-setting sheet on the first day of placement.

4.4 Healthcare Facility Unit Orientation

Each area will be designed differently and students need time to find their way around. The provision of a guide such as a 'Seek and Find' sheet assists them in locating different areas and items can be helpful. The Emergency Trolley and Fire Safety procedures and equipment should be identified.

Sometimes the nursing staff in the area will be available to show students the location of patient information, the use of the handover sheets or daily shift planners and the process for handover. The students may be allocated to their RN buddy and continue the shift with their guidance.

4.5 Scope of Practice

The Scope of Practice for an undergraduate nursing student is that which a student is **educated**, **competent and authorised to perform for safe**, **professional practice** (Appendix C). The scope of practice for an individual registered nurse or undergraduate nursing student is influenced by the:

- Context in which they practice
- Patients and client's health needs
- Level of competence and education of the individual registered nurse or nursing student and qualifications of the registered nurse
- Service provider's policies.

As students' progress through the undergraduate program, their scope of practice will change accordingly to their experience and year level of education/training. The Course Convenor of all clinical courses can be contacted if there are concerns about what constitutes a student's **current scope of practice**. Students must work within their current scope of practice and any student who practices outside their current scope of practice may receive a fail grade for clinical placement.

Health services have strict policies on medication administration. Students are advised to ensure they read, understand and conform to the School of Nursing and Midwifery's policy on Administration of Medication by Students on Clinical Placement in the Professional Practice Policy (Appendix D). The NBMA <u>National framework for</u> <u>the development of decision making tools for nursing and midwifery practice</u> contains information about scope of practice and the decision making framework.

4.6 Getting the most out of Clinical Placement

Students have an obligation to make the most of every learning opportunity. They are encouraged to:

- Take the time to effectively communicate placement goals, personal strengths, expectations, rights and responsibilities.
- Actively demonstrate that they work safely and professionally, able to make decisions and take actions in line with their theoretical preparation and scope of practice.
- Ask questions and seek further information in situations that are unfamiliar to them.

Clinical Facilitators/Preceptors and academic staff from the School of Nursing and Midwifery have the right to expect respect from students. You have clinical and theoretical expertise and are therefore, expected to make judgments about students' clinical performance based on the Registered nurse standards for practice (NMBA, 2016).

4.7 Supervision and Medication Administration on Clinical Placement

Students can work with Enrolled Nurses (EN) as they are still under **indirect supervision** of the Registered Nurse (RN). However, students must have **direct, personal supervision** by a Registered Nurse at all time, with any medication administration. (Appendix D).

Personal supervision means 'continuous and within close proximity', so that the supervisor is to be able to assist with or cease the activity /intervention promptly (see Scope of Practice document). (Appendix C).

Students are advised to use approved, contemporary and scholarly resources to guide their practice such as MIMS, the Injectable Drug Guide or other electronic sources for drug information. It is helpful to encourage them in the use of a small notebook to keep important information and quick reminders for use in their practice. BN Guide for Clinical Facilitators and Preceptors 2020 18

4.8 During Clinical Placement

Working with students on an individual basis during clinical placement helps to form your own assessment of their clinical performance. Discussions with the RN buddy are also important to gain an overview of student progress. Prioritise and give adequate time to students who need more guidance.

A <u>daily journal or notes</u> in another format are a useful adjunct to guide assessment and to validate actions and decisions. Ensure you are always contactable by both staff and students. Regular and ongoing feedback is essential for the student to guide and reassure them.

<u>Mid-placement feedback</u> with each individual student is carried out in a more formal manner, using the ANSAT as a measure and guide for performance. It is also important to use this opportunity to review the student's goals. Students are expected to complete their own halfway feedback for discussion at this time (this copy remains with the student).

It is suggested that you spend a short time at the end of each week to <u>debrief</u> with the student group to recap on the week. More structured debriefing may be needed if a critical incident or situation has occurred, whereby the Clinical Course Convenor should also be informed.

4.9 Workplace Incidents on Clinical Placement

The University requires those responsible for all University activities whether on or off campus to comply with relevant Health and Safety legislation, codes of practice, advisory standards and established good practice including Australian Standards as well as University policies and procedures.

Work Health and Safety inductions are conducted prior to and/or upon commencement of clinical placement at a health care facility. Briefings are site specific, and students and Clinical Facilitators may be required to complete on-line modules before the actual placement. Fire Safety briefings and Patient Handling Risk Assessment are also covered.

From time to time, incidents involving a student and/or Clinical Facilitator occur whilst on clinical placement. Following an incident and to ensure the safety and well-being of all involved, the Clinical Facilitator **MUST** ensure:

- That appropriate staff at the facility are notified
- That appropriate medical attention is given, as required
- That the policy of the health-care facility is followed including completion of any workplace health and safety forms
- That Griffith University online documentation is also completed via GSafe
- The relevant Clinical Course Convenor and/or CPC are informed.

5. ASSESSMENT ON CLINICAL PLACEMENT

There are several aspects of professional performance that are assessed. These include *clinical knowledge, skills and performance, behaviour and fitness to practice*. Feedback is an essential part of continuous professional development and it is important that you provide constructive feedback to students about their clinical performance to help them learn and grow as a healthcare professional.

5.1 The Assessment Tool (ANSAT)

The Australian Nursing Standards Assessment Tool (ANSAT) is used to assess the students' skills and competence during clinical placements. Clinical Facilitators/Preceptors must be familiar with the tool and the national standards for practice for the Registered Nurse, as per the Nursing and Midwifery Board of Australia (NMBA) requirements. (Appendix E).

5.2 Professional Standards of the Registered Nurse

Student performance is assessed against the Registered Nurse standards for practice, which consist of the following seven standards:

- 1. Thinks critically and analyses nursing practice
- 2. Engages in therapeutic and professional relationships
- 3. Maintains the capability for practice
- 4. Comprehensively conducts assessments
- 5. Develops a plan for nursing practice
- 6. Provides safe, appropriate and responsive quality nursing practice
- 7. Evaluates outcomes to inform nursing practice

The ANSAT (Australian Nursing Standards Assessment Tool) encompasses these seven standards.

The NMBA *Framework for assessing national professional standards for registered nurses, enrolled nurses and midwives* provides a useful resource to guide the assessment of students:

http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx

5.3 The Assessment Process

Documenting the Assessment

The ANSAT is currently available on-line and is accessed via Sonia (database used to allocate and manage clinical placements). You will need to access the Sonia database to complete the ANSATs for students you are allocated on clinical placement: <u>SONIA database</u>.

An online password will be emailed prior to placement. It is recommended that Clinical Facilitators document anecdotal notes during the placement for personal reference. ANSAT support is available online and via the Clinical Placement Office.

In some circumstances, hardcopy ANSAT forms may need to be used when online access is not available. Students are required to take a hard copy of the ANSAT form with them to all placements (along with their Goal sheet) to complete a mid-placement self-evaluation. Hardcopy forms can be accessed through the Placement Essentials web page.

(NOTE: Electronic versions of forms may appear different in layout and format because of the electronic platform. However, the information remains the same.)

<u>Goals</u>

All Nursing students are required to provide a copy of their Goals (either typed or handwritten in the goal setting sheet) for each placement and give to the Clinical Facilitator/Preceptor on the first day of placement. Failure to do so will indicate that the student is not adequately prepared, and a Clinical Learning Plan may be required, for discussion with the Clinical Course Convenor and student.

Competency is assessed in each of the seven standards of nursing as outlined in the ANSAT. The Clinical Facilitator/Preceptor structures their continual and collective assessment by considering the student's **knowledge**, **skills and conduct** in relation to the seven standards of practice.

It is the student's responsibility to present to clinical placement with well thought out goals documented on the goal setting sheet. These goals can be modified or added to in line with learning opportunities for a particular placement.

Assessment in the clinical setting is a continuous process to facilitate early identification of challenges or learning needs:

- <u>Ad Hoc Assessment</u>: Ongoing observations, written notes and staff/RN buddy feedback help formulate a 'clinical picture' of student progress. At any time, early warning signs that a student is performing poorly must be reported to the Clinical Course Convenor and/or Professional Practice Coordinator as soon as possible. Where specific issues are identified, a Formative Review may be required.
- <u>Mid-Placement Assessment (Formative)</u>: Structured assessment using the ANSAT is used to evaluate the student's progress to date and support ongoing development for the remainder of the placement. Students are encouraged to provide their own self-evaluation (on a hard copy) for discussion and provide examples of their performance. The student's goals are to be reviewed at this time and may be used to document ongoing learning and strategies.
- <u>End of Placement Assessment (Summative)</u>: Structured assessment is completed by the CF and discussed with the student, documenting the student's clinical achievements. Students are encouraged to self-evaluate and provide examples of their performance. Comments may be included on the tool.

The ANSAT must be completed and signed off/submitted by both the student and CF. Students are strongly encouraged to provide reflective comments on the ANSAT. All hard copy ANSATs must to be returned to the University (scanned/emailed and mailed).

The Clinical Course Convenor reviews all ANSATs and determines the outcome of the assessment, which in the majority of cases, is that the student is deemed competent and has satisfactorily completed the clinical placement.

Any **absence** from clinical placement will lead to '<u>Result Withheld'</u> being marked on the ANSAT. The Clinical

Course Convenor will determine whether completion of missed clinical hours is required once the ANSAT has been reviewed. The Clinical Course Convener makes the final decision regarding the award of a result for the clinical placement assessment item.

5.4 Identifying Poor Clinical Performance

There may be occasions on clinical placement when a student's performance is not reaching the expected standard. Early identification facilitates early intervention to support the student's learning. The Clinical Course Convenor should always be notified of any concerns with the students' knowledge or skill level, medical or psychological concerns.

In the first instance, an Informal discussion may be all that is needed.

- Use the student's goal sheet to update goals and strategies for improvement
- Document anecdotal notes for your record

Should the issues be more serious or the informal discussion has not been effective (allow a day or two), then a more structured process is required.

A <u>Clinical Learning Plan</u> is a two-part learning tool that the CF /Preceptor and/or Clinical Course Convenor develops with the student to guide the student to success on clinical placement. The Clinical Learning Plan outlines both assessment and a learning plan. (Appendix F outlines a flow chart for Clinical Learning Plans).

- **Assessment**: This part provides the student with written feedback outlining specific details of where the student's performance is below standard. The issues are identified specifically in terms of the standards of the Registered Nurse Standards for Practice (NMBA, 2016) as outlined on the ANSAT.
- Learning Plan: A written learning plan outlines what the student is expected to demonstrate for each of the identified issues <u>and</u> strategies to achieve the desired outcomes. A specific timeframe is given for the student to achieve the identified goals. Continuous feedback and direction should be given to the student to support their outcome, as necessary.

The main aim of the Clinical Learning Plan is to ensure that any professionalism, behaviour or clinical practice deficits are identified and a corrective action plan developed. This maximises the success rate for the student. As such, students should look upon the review process as a positive learning strategy.

A student who is unable to successfully achieve the plan outlined in the Clinical Learning Plan and is unable to demonstrate appropriate levels of *knowledge, skills* or *conduct* within the seven standards outlined in the Registered Nurse Standards for Practice (NMBA, 2016), **will fail the clinical placement**. The student will be notified and asked to attend a meeting with the Clinical Course Convener. They may also wish to meet with the Deputy Program Director to discuss future options.

Please refer to Student Assessment Flow Chart on page 26.

5.5 Safety Issues

If at any time there is a safety concern regarding the student, patient/clients or staff, the student must be supported somewhere safe, and the Clinical Course Convenor and facility staff must be notified immediately. They will advise on course of action.

5.6 Student Attendance Record

Students are expected to attend every day of clinical placement as per BN guidelines and contract document. Hours of attendance are recorded if possible daily on the ANSAT.

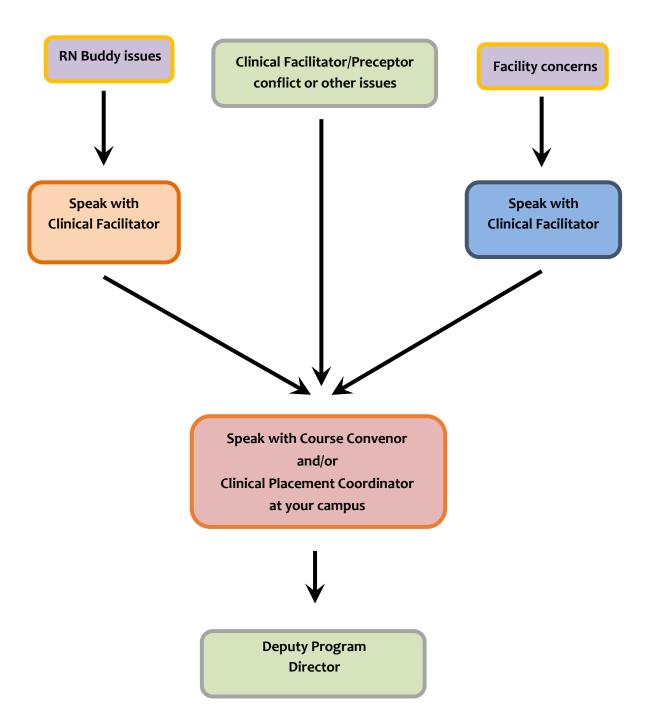
Any absence from clinical placement will lead to 'Result Withheld' being marked on the Assessment Tool. Final sign off and decisions about completion of missed clinical hours is managed by the Clinical Course Convenor, once the ANSAT and hours have been reviewed.

Students must advise all relevant parties as per the BN contract of any absences from placement. Students must also upload a copy of any medical certificates/documentation to Sonia, to account for any absences from placement.

6. CHALLENGES ON CLINICAL PLACEMENT

Generally, clinical placement is both inspiring and rewarding and most students value the experience and opportunities presented to them.

However, there can be situations which arise where a student feels there are issues of concern. In every situation there are channels of communication and it is important that these are adhered to in a professional manner.





There are processes for further appeal should the channel of communication outlined above does not resolve student concerns. Refer to information about Griffith University's Student Appeals and Grievance Policy available at: https://www2.griffith.edu.au/students/student-review-appeal

6.1 Feedback about Clinical Placement

Bachelor of Nursing students may be provided with the opportunity of online evaluation following each clinical experience. Students may be asked for feedback on their Clinical Facilitator/Preceptor and the facility (ward/unit) at which they were placed. This is an important way for students to rate and offer constructive feedback about their experience. The Clinical Placement Office will use feedback constructively and endeavour to address any areas of concern identified by students.

Feedback from Clinical facilitators is also welcomed and can be provided via the generic email.

6.2 Student Management

Managing students within the clinical environment will require you to draw upon a broad range of skills including effective communication, resolution of conflict, supportive feedback and objective assessment.

As a Clinical Facilitator, part of your role is establishing and maintaining a trusting 'therapeutic relationship' with students and facility staff members. From time to time, you may be faced with conflict situations between yourself and students, the student and the facility, or between two students. Interpersonal conflict occurs whenever an action by one person prevents, obstructs or interferes with the actions of another person. People often mistakenly believe that a good relationship is one where no conflicts are present. However, skilfully managed conflicts facilitate change and improvement, and should not be avoided as many opportunities may be missed. Griffith University policy and procedures are at:

http://www.griffith.edu.au/about-griffith/complaints-grievances

6.3 Conflict Resolution Strategies

- Approach the other person
- Make sure you gather information about the situation from all parties involved and ascertain everybody feelings about the incident
- Do not hit and run (Example: when somebody gives you their views about conflict then disappears)
- Address issues with people involved in the conflict when you have the time and appropriate venue to discuss it
- Timing is important always ensure there is enough time so that the other person can respond
- Communicate openly
- Express your perception of the issues in conflict and try to do so in a non- threatening way
- Focus any anger onto the issues at hand, not on the other person's behaviour, character or personality
- Consider the other person's point of view about the situation
- Be a good listener, remain objective and factual, and avoid emotional responses
- Only ask for change when change is possible

- Distinguish between behavioural change that is possible and modification of a personality trait which may be a more difficult
- Always suggest and negotiate changes in behaviour.

6.4 Communication Styles

The manner in which you present yourself verbally and physically in a conflict situation will greatly affect the outcome. Try some of these approaches and suggest that both parties do likewise:

- Describe the other person's actions
- Do not label or insult each other with stereotyping or name calling
- Define the conflict in the most specific way possible
- Focus on your feelings ('l' phrases) such as 'When you do/say...I feel ...'. Statements starting with "you.." are perceived as accusations
- Define the conflict as a mutual problem to be solved not as a lose/win situation
- Describe the actions of yourself and the other person that may resolve the conflict.

Clarify the following issues:

- What are the disagreements and differences between me and the other person?
- What do we agree on?
- What action of the other person do I find unacceptable?
- What are possible solutions that satisfy both me and the other person?
- What are the things that I need to do to resolve the conflict?
- What are the things that the other person needs to do to resolve the conflict?

Be clear and direct about the situation:

- Inform the other person
- Express the need for mutual effort if resolution is going to be a possibility
- Take the other person's perspective resolving conflicts constructively requires an understanding of the other person's thoughts, feelings and needs
- Listening Skills try to view the conflict from the other person's standpoint. There is nothing more important in resolving conflicts than understanding how the other person views the conflict
- Conflicts are resolved when both parties reach an agreement. They need to be satisfied with the agreement and committed to abiding to it.

What to do when resolution does not seem to be working:

Ask yourself the following questions to determine the value or impact factor of the conflict:

- What will I gain from continuing the conflict?
- What does the other person gain from continuing the conflict?
- What do I lose from continuing the conflict?
- What does the other person loose from continuing the conflict?

Reflection and Empowerment:

It is important after any event or situation to reflect.

- Support the student to reflect to deepen their awareness and learning
- Reflect on how you handled an event to deepen your insight and skills

It can be helpful to use a reflective model (e.g. Gibbs, 1988) to guide the steps of reflection and maximise awareness and learning.

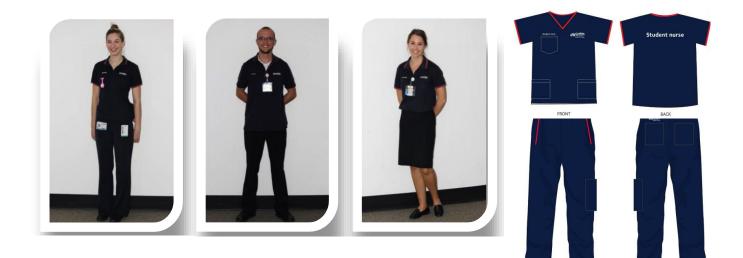
When all else fails!

You have a responsibility to all students on placement. If you find that one student is monopolising your time due to conflict issues, contact the Clinical Course Convenor and /or the Clinical Placement Coordinator (from the student's campus).

If a student becomes threatening to you, other students or facility members, they are to be immediately removed from the healthcare facility. Liaise with the Clinical Course Convenor and appropriate facility staff, and inform the Clinical Placement Office as soon as possible.

7. APPENDIX

Appendix A: BN Uniform Requirements



Uniforms

- Griffith student ID Badge is to be carried with you at all times or worn and visible at all times.
 Plastic sleeves and clips for ID are available for purchase at your campus bookstore.
- Students in the School of Nursing and Midwifery are required to wear the School uniform at all times on placement.
- The uniform comprises the following:
 - Navy blue Griffith University 'Nursing' polo shirt (as shown in the images above). These are available for purchase at your campus bookstore.
 - Tailored black or navy long pants. Knee length black or navy skirts are also allowable for female Nursing students.
 - Tailored black or navy tailored (city) shorts may also be worn.
 - o Griffith branded 'student nurse' scrubs
- Please note that scrubs cann<u>ot</u> be worn in the aged care setting, and therefore scrubs should not be purchased to wear during 1st year placement.
- No Jeans
- No ¾ Pants
- No tight pants or skirts
- No leggings

Footwear

- Closed in black shoes. Shoes need to be leather (or imitation) so as to be easily cleaned after body fluid spills, and to reduce risk such as needle stick injury.
- No canvas shoes
- No open toed shoes
- No ballet flats
- <u>No trainers/runners with mesh</u> (shoes acceptable if <u>completely</u> black or navy and leather (or leather like).

General appearance

- Hair should be clean, neat and tidy. Long hair should be tied up, off shoulder/collar.
- Garments should be clean, ironed, neat and tidy.
- No bare midriffs
- No tracksuits or sporting garments
- No slogans on clothing to be visible
- <u>No painted fingernails</u>
- No long or acrylic nails.
- <u>No ornate flowers, clips, or head bands to be</u> worn.

Jewellery

- A single flat wedding ring/band may be worn but must not interfere with effective hand hygiene practice.
- 1 pair of earrings allowed (plain studs only)
- <u>No wrist watches or rings (except for the above).</u>
- Facial piercings MUST be removed.

Bare below the elbows

Due to hospital policy and infection control best practice, all students must be bare below the elbows.

This includes long sleeves, wrist watches, and rings not being allowed.

Please note that <u>NO</u> exceptions are made to this rule for students of different cultural or religious backgrounds.

Uniform Variations

'No Uniform' on some Mental Health Placements (Smart Professional Attire)

Only worn if pre-brief stipulates No Uniform

Professional appearance must be maintained at all times.

- No bare midriffs,
- No tight or revealing clothes
- No T-shirts.
- No Jeans or Shorts. If trousers or slacks are worn, they should be tailored (clothing with frayed areas are not to be worn).
- Skirts and dresses to be mid-knee length.
- No sports shoe, joggers, sandshoes, sneakers, etc.; thongs, crocs open toed shoes are not permitted.
- Collared shirts are to be worn. Polo shirts are acceptable.
- No items with writing or advertisements.

Cultural Considerations

The below points are appropriate ONLY for students observing cultural & religious practices.

- Long-sleeved, cotton Black 'skivvy' may be worn under the approved uniform shirt.
 Students will be required to roll the sleeves up when performing clinical procedures, maintaining asepsis and in all handwashing procedures.
- Full dresses (to the floor/ankle) are not permitted as clinical placement uniform.
- Plain Black/Navy Blue or White head covering/hijab/headscarf/jilbab may be worn. It must be light weight fabric, tucked and pinned to hold in place, and MUST be tucked in the shirt at all times.
- Burka, Khimar and Sitaras are not permitted to be worn on clinical placement.
- Plain Black/Navy Blue or White patka/keski turban may be worn

Fully Enclosed Shoes

Navy Blue or Black fully enclosed leather (or leather like) shoes, with non-slip soles, are the uniform requirement. Footwear should be clean and without any visible dirt. Appropriate footwear as described is to be worn for all laboratory sessions and on all clinical placements.



The shoes must NOT be made from mesh

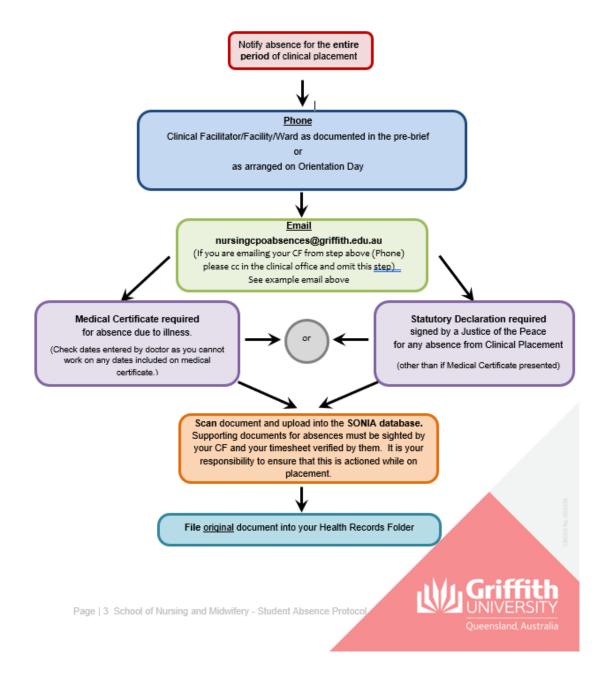
The shoes (especially ones with white soles) must be in good repair, clean and tidy. The below models are the ONLY FRANKiE4 footwear that has been approved for clinical placement.

> WiNNiE Black/White NAT Black/Black JACKIE II Black ELLIE Black Lea

Appendix B: Notification procedures for absence from clinical placement

Students who are absent from clinical placement must comply with the notification procedures as outlined in the following flowchart. A **medical certificate or a statutory declaration** (signed by a Justice of the Peace) that covers each day of missed clinical placement must be uploaded into the Students Time Sheet. One email should be sent to <u>nursingcpoabsences@griffith.edu.au</u> daily for each absence. The original document is kept by the student and filed in their Health Records Folder.

Absence from Clinical Placement Flowchart



Appendix C: Scope of Practice

Griffith

Undergraduate student nurses' scope of practice School of Nursing & Midwifery

Assumptions about learning

1.Students are active learners

2.Students learn through research, reflection, observing, assisting & performing clinical skills, assessing, and providing patient care - all within the parameters of an RN scope of practice

3.Learning in the workplace entails students' incrementally increasing their capacities to understand what clinical situations mean by developing their analytical thinking in relation to the particular demands of each situation, including making connections between the need to use and apply existing knowledge and the need to acquire new knowledge 4.Learning is supported by creativity, imagination and reasoning

5. Learning requires inductive and deductive thinking

6.Learners draw on their prior experiences and apply these to their meaning making in new contexts

7. Experts support learners to be responsible and accountable for their knowledge and practice

8.Nurses as adult learners are self-directed, lifelong learners

Year 1 Bachelor of Nursing student learner

First year students do not

LIMITATIONS

administer any medications intravenously

administer S8 medications carry out invasive interventions/procedures

Theoretical studies in Year 1 focus on:

 nursing as a professional health discipline, nursing assessment, developing therapeutic relationships, and undertaking essential nursing care

The learning concepts and content of the Bachelor of Nursing (BN) scaffold across the three years of study

Student expectation of the placement experience

1. Students expect Registered Nurses will facilitate their learning 2 Students expect to be buddied with different health workers during their experience

3. Students expect to be held to account for the rationale of particular nursing care before undertaking that care/skill/procedure

4. Students are expected to observe a procedure before performing the same procedure

5. Students expect to be allocated to appropriate learning activities suitable to their abilities and clinical setting

6.Students expect that they will be under direct, personal supervision for new and high risk procedures



Year 2 Bachelor of Nursing student learner

Second year students do not

administer S8 medications intravenously

carry out complex invasive interventions/procedures e.g. CVAD dressings

Theoretical studies in Year 2 focus on:

•assessment and planning, delivery of simple invasive procedures, and understanding the nursing care of people living with different diseases

•care of the person with a chronic illness including mental illness

care of the child and family

Students responsibilities for learning in the clinical area 1.Students are legally and ethically responsible for the care that they provide

- 2. Students are responsible for being prepared for learning by:
 - completing all 'fit for practice' requirements by the due date
 - · reading and comprehending the allocated pre-brief for clinical placement
 - completing the health facility online orientation .

. being aware of the limits associated with their year level 3. Students are responsible for upholding the Professional Code of Conduct

4 Students are responsible for upholding the NMBA Code of Ethics 5 Students as self-directed learners will ensure theoretical knowledge before workplace learning

6.Before performing a nursing procedure, the student is responsible for reviewing the health organisation's policy & procedural information until they are very familiar with the clinical skill and can explain the procedural steps in their own words

Year 3 Bachelor of Nursing student learner

Third year students do not

carry out complex invasive interventions/procedures without direct supervision e.g. CVAD dressing

Theoretical studies in Year 3 focus on:

evaluation of nursing care and incorporates second and first year knowledge, skills and abilities

care of the person with complex needs

The learning concepts and content of the Bachelor of Nursing (BN) scaffold across the three years of study

Personal Supervision means 'continuous and within close proximity', so that the supervisor is to be able to assist with or cease the activity/intervention promptly. Personal supervision should be used for nursing care that has a higher risk of injury to the patient/client/resident

Bibliography:

Australian Catholic University (2015) Scope of Practice; GCH Undergraduate Nurses Scope of Practice; Griffith University (2016) Scope of Practice for years 1, 2, and 3; GU (2016) BN Curriculum, 2016-2021, Brisbane Australia, GU, Queensland University of Technology (2015) Scope of Practice; Qld Govt (1996). Health (Drugs & Poison) Information 1996; Southern Cross University (2016) Scope of Practice; University of Southern Queensland (2015) Scope of Practice; University of Queensland (2016) Scope of Practice.

LIMITATIONS



LIMITATIONS

care of the person with an acute illness

Appendix D: Administration of medications by students on clinical placement



School of Nursing and Midwifery: Bachelor of Nursing

ADMINISTRATION OF MEDICATIONS BY STUDENTS ON CLINICAL PLACEMENT

The School of Nursing and Midwifery has adopted the following policies in relation to the administration of medications by students on clinical placement:

Theoretical Preparation

Students should not be involved in the preparation and administration of medication until after completion of the relevant theoretical and practical component of the program and as indicated by course convenors.

Scope of Practice

Following relevant theoretical and practical preparation, students may prepare and administer medications under **direct supervision** only, of either a <u>Registered Nurse</u> (RN) employed by the healthcare agency, or their RN Clinical Facilitator or RN Preceptor. The supervising Registered Nurse or Clinical Facilitator/Preceptor remains legally responsible for the administration of the medication.

Medication preparation and administration to adults or children is governed by the policy and procedure guidelines of the health care facility and the scope of practice of the student.

Direct Supervision

"Direct supervision is when the supervisor is actually present and personally observes, works with, guides and directs the person who is being supervised". (NMBA National framework for the development of decision making tools for nursing and midwifery practice, 2007, p19)

National framework for the development of decision making tools for nursing and midwifery practice

Schedule 8 Drugs

Students should only be involved in preparing and administering these drugs when **directly supervised** and when the medication is checked by two Registered Nurses employed by the health care facility or by one Registered Nurse employed by the facility and the Clinical Facilitator/Preceptor (depending on the policy of the hospital or Health Service). The Clinical Facilitator/Preceptor must be aware of each healthcare agency's policy on administration of medication by students and to comply with that healthcare agency's policy if the University policy is different.

Appendix E: ANSAT

Australian Nursing Standards Assessment Tool

School of Nursing and Midwifery

A	LG	GC	
Year Level			
1	2	3	

	Griffi	th Ide	entif	Icatio	n Nu	imbe	r
s							

School of Nursing and Midwifery Bachelor of Nursing

ANSAT 2020

Final Mark

Final Mark
Course Conxense
Sign
Fail
Result Withheld
Date

To be used in conjunction with: Nursing and Midwifery Board of Australia (NMBA) <u>National Competency Standards for the Repistered Nurse</u> available at: http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.asco#competencystandards

h

STUDENT NAME	
PLACEMENT DATES	
COURSE NAME & CODE	
FACILITY/AGENCY NAME	
CLINICAL SETTING/WARD	
CLINICAL FACILITATOR	

ATTENDANCE	Monday	Tuesday	Wednesday	Thureday	Friday	Saturday	ŝunday	Hours COMPLETED
WEEK 1	pce.	906	605	55	004	60	906	
WEEK 2	pce.	906	605	50	806	55	50	
WEEK 3	pce.	906	55	5	906	5	906	Hours ABSENT ↓
WEEK 4	pce.	906	box.	box.	806	bus.	906	

KEY to FINAL RESULT						
Final Mark		Description of Performance				
NGP Pass The student, with support that is commensurate to the student's level, has demonstrated an acceptal and safe standard of knowledge, skills and attributes, in relation to the four (4) domains of nursing pract outlined in the dinical assessment tool.						
F	Fail	The student has been unable to achieve an acceptable standard in one or more of the following domains from the Nursing and Midwifery Board of Australia - National competency standards for the registered nurse: Thinks ortically and analyses nursing practice, Engages in therapeutic and professional relationships, Maintains the capability for practice, Comprehensively conducts assessments, Develops a plan for nursing practice, Provides safe, appropriate and responsive quality nursing practice, and Evaluates outcomes to inform nursing practice.				
RW	Result Withheld	The student has not completed the required clinical placement hours. Any additional clinical requirements as per the Absence from Clinical Placement Protocol and in consultation with Course Converses.				

Assessor Name	e:	Assessor Signature:							
Student Signature:			Date:						
Please circle:	Documentation attached:	Yes	No	Anecdotal Notes Attached:	Yes	No			



ANSAT 2020 - Australian Nursing Standards

Control of Nursing and Midwife

Student Name:	1		Student ID):					
Course Name / Code:	Year Level								
Clinical Setting / Ward:	Placement Dates:						\neg		
Assessment type / date:									
	and practices not performed								
2 = Expected behaviour	and practices performed below the acceptable/sa		standard						
	and practices performed at a satisfactory/pass sta	andard							
	and practices performed at a proficient standard								
S = Expected behaviour N/A = not assessed	and practices performed at an excellent standard								
-	indicates that the STANDARD has NOT been achiev	red							
<u></u>	Assessment item				Circ	le or	ne ni	umb	er
1. Thinks critically and ana	lyses nursing practice								
· · · · ·	cording to relevant legislation and local policy			1	2	3	4	5	N/A
	to guide decision making and practice			1	2	3	4	5	N/A
	individual and cultural (including Aboriginal and	Torres Str	ait Islander)	1	2	3	4	5	N/A
	a uates relevant literature and research evidence t	o deliver i	nuality				<u> </u>		
practice		a anner i	dennek	1	2	3	4	5	N/A
	and accurate documentation			1	2	3	4	5	N/A
	and professional relationships								
	to maintain personal and professional boundarie	es		1	2	3	4	5	N/A
 Collaborates with the heat centred care 	Ith care team and others to share knowledge that	it promoti	es person-	1	2	3	4	5	N/A
	nember of the healthcare team to achieve optime	um health	outcomes	1	2	3	4	5	N/A
	a person's rights and wishes and advocates on th			1	2	3	4	5	N/A
3. Maintains the capability				-	-	_		_	
, ,	nt to life-long learning of self and others			1	2	3	4	5	N/A
	esponds to feedback for continuing professional	developm	ient	1	2	3	4	5	N/A
,	ith education to enable people to make decision					-			
their health	, ,			1	2	3	4	5	N/A
 Recognises and responds 	appropriately when own or other's capability for	practice i	is impaired	1	2	3	4	5	N/A
 Demonstrates accountabil 	lity for decisions and actions appropriate to their	role		1	2	3	4	5	N/A
4. Comprehensively conduc	ts assessments								
 Completes comprehensive 	and systematic assessments using appropriate a	and availa	ble sources	1	2	3	4	5	N/A
 Accurately analyses and in 	terprets assessment data to inform practices			1	2	3	4	5	N/A
5. Develops a plan for nurs	ing practice								
 Collaboratively constructs 	a plan informed by the patient/dient assessmen	it		1	2	3	4	5	N/A
 Plans care in partnership v outcomes 	with individuals/significant others/health care tea	am to ach	ieve expected	1	2	3	4	5	N/A
6. Provides safe, appropria	te and responsive quality nursing practice			_					
 Delivers safe and effective 	care within their scope of practice to meet outo	omes		1	2	3	4	5	N/A
	sion and delegates care safely within their role ar		of practice	1	2	3	4	5	N/A
 Recognise and responds to 	o practice that may be below expected organisati			1	2	3	4	5	N/A
regulatory standards	form oursing practice								
 Evaluates outcomes to li Monitors progress toward 	expected goals and health outcomes			1	2	3	4	5	N/A
	evaluation of goals and outcomes in consultation	on with th	e health care	1	-		4	-	
team and others	evaluation of guars and doctomes in considerate	ar wran ar	e meantri care	1	2	3	4	5	N/A
GLOBAL RATING SCALE - I	n your opinion as an assessor of student perf	ormance	, relative to the	ir sta	age of	f prac	tice,	the o	verall
performance of this student	in the clinical unit was:		_						_
Unsatisfactory	Limited Satisfactory		Good				Еж	ellen	t
DISCUSSED: YES N	NO ADDITIONAL PAPERWORK:	YES	NO						
			*complet	in thi	reart		a v ii	the la	
DATE:	_				ative	_			
NAME:			Pas			YES		NO	
SIGNATURE:			1 43	500		120			
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ASSESSOR FEEDBACK:	
 What is the student doing well and how can this be 	e sustained?
2. What can be improved and how will this be achieved	- 15
3. Plans for learning and timeframes for achievement	
Signature:	Data-
Signature	Date:
STUDENT REFLECTION:	
STODERT REFERENCE	
Signature:	Date:

Scoring rules:

- · Circle N/A (not assessed) ONLY if the student has not had an opportunity to demonstrate the behaviour,
- If an item is not assessed it is not scored and the total ANSAT score is adjusted for the missed item
 Circle ONLY ONE number for each item
- · If a score falls between numbers on the scale the higher number will be used to calculate a total
- · Evaluate the student's performance against the MINIMUM practice level expected for their level of education

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	Student Name:			Student ID):					
c	ourse Name / Code:	Year Leve								
Cli	nical Setting / Ward:	Placement Dates:								
Asse	essment type / date:	Summative								
Code:	1 = Expected behaviours	and practices not performed								
	2 = Expected behaviours	and practices performed below the acceptable/sat	isfactory	standard						
		and practices performed at a satisfactory/pass st	andard							
		and practices performed at a proficient standard								
		and practices performed at an excellent standard								
	N/A = not assessed									
<u> </u>	**Note: a rating 1 &/or 21	indicates that the STANDARD has NOT been achieve	:d			~				
	1. I	Assessment item				urc	ie or	ne nu	Imp	er
	hinks critically and analy					-			-	
		ording to relevant legislation and local policy			1	2	3	4	5	N/A
		to guide decision making and practice			1	2	3	4	5	N/A
		ndividual and cultural (including Aboriginal and T	orres Str	ait Islander)	1	2	3	4	5	N/A
	eference and differences									
		ates relevant literature and research evidence to	deliver o	quality	1	2	3	4	5	N/A
<u> </u>	actice					_			-	
		and accurate documentation			1	2	3	4	5	N/A
	22 1	nd professional relationships								
		to maintain personal and professional boundaries			1	2	3	4	5	N/A
		th care team and others to share knowledge that	promote	es person-	1	2	3	4	5	N/A
	entred care						_			
		ember of the healthcare team to achieve optimu			1	2	3	4	5	N/A
		a person's rights and wishes and advocates on the	eir behal	f	1	2	3	4	5	N/A
	laintains the capability									
		t to life-long learning of self and others			1	2	3	4	5	N/A
• R	eflects on practice and re	sponds to feedback for continuing professional d	evelopm	ent	1	2	3	4	5	N/A
• D	emonstrates skills in heal	th education to enable people to make decisions	and take	action about	1	2	3	4	5	N/A
	eir health			1	_	-				
	<u> </u>	ppropriately when own or other's capability for practice is impaired				2	3	4	5	N/A
• D	emonstrates accountabili	ity for decisions and actions appropriate to their r	rale		1	2	3	4	5	N/A
11. C	omprehensively conduct	ts assessments								
• C	ompletes comprehensive	and systematic assessments using appropriate an	nd availa	ble sources	1	2	3	4	5	N/A
• A	ccurately analyses and int	terprets assessment data to inform practices			1	2	3	4	5	N/A
12. D	evelops a plan for nursi	ng practice								
• C	ollaboratively constructs a	a plan informed by the patient/client assessment			1	2	3	4	5	N/A
• PI	ans care in partnership w	ith individuals/significant others/health care tear	n to achi	ieve expected	1	2	3	4	5	N/A
0	utcomes					2	3	4	2	пуя
13. PI	rovides safe, appropriat	e and responsive quality nursing practice								
• D	elivers safe and effective	care within their scope of practice to meet outco	mes		1	2	3	4	5	N/A
• Pr	ovides effective supervisi	on and delegates care safely within their role and scope of practice				2	3	4	5	N/A
• R/	ecognise and responds to	practice that may be below expected organisational, legal or				2	3	4	5	N/A
	gulatory standards				1	2	3	4	5	пуя
14. E	valuates outcomes to in	form nursing practice								
• M	onitors progress toward	expected goals and health outcomes			1	2	3	4	5	N/A
• M	odifies plan according to	evaluation of goals and outcomes in consultation	with the	e health care	1	2	3	4	5	N/A
te	am and others				1	2	3	4	5	N/A
GLO	BAL RATING SCALE - In	your opinion as an assessor of student perfo	rmance,	relative to the	ir sta	nge of	f prac	tice, t	he o	/erall
		in the clinical unit was:								
Unsatisfactory Limited Satisfactory Good							Exc	ellen		
		IO ADDITIONAL PAPERWORK:	YES	NO						
DAT	E:	_		*complet					this is	a
						ative :		_		
				Pas	sed	:	YES		10	
SIGN	IATURE:									

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SUMMATIVE ASSESSOR FEEDBACK:
4. What has the student done well throughout this placement?
5. What strategies can the student use to advance their learning in future placements?
6. Any further comments?
Signature: Date:
STUDENT REFLECTION:
Signature: Date:

Scoring rules:

- · Circle N/A (not assessed) ONLY if the student has not had an opportunity to demonstrate the bebaviour.
- If an item is not assessed it is not scored and the total ANSAT score is adjusted for the missed item
- Circle ONLY ONE number for each item
- · If a score falls between numbers on the scale the higher number will be used to calculate a total
- · Evaluate the student's performance against the MINIMUM practice level expected for their level of education

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Appendix F: Clinical Learning Plan

Clinical Learning Plan (CLP) Flow Chart

