Preceptors Workshop 2024

Presented by GCPHN, Griffith University and Southern Cross University



An Australian Government Initiative





Workshop Agenda

- 1. Welcome, acknowledgement to country.
- 2. GCPHN , Griffith University and Southern Cross introductions and key contacts
- 3. What is preceptorship?
- 4. Southern Cross and Griffith University Presentation
- 5. Q&A
- 6. Close



Meet the GCPHN Clinical Placements Team





Sarah Davies

Senior Project Officer Clinical Placements



Monika Mackay

Project Officer Clinical Placements

Amber Costello

Project Support Officer Clinical Placements

Introduction and Key Contacts



Kaylene Barchetta | Nurse Lecturer, School of Health, Nursing. Year 1-2 Phase Lead, Southern Cross University

Bernadine Romero | Nurse Lecturer, School of Health, Nursing. Year 2-3 Phase Lead, Southern Cross University



Dr Judith Needham | Senior Lecturer, Director of Professional Practice, School of Nursing and Midwifery, Griffith University

Karen Carrington | Team Leader Placements Office, Griffith University

Renee Stone | Lecturer, Clinical Placement Coordinator, Griffith University

What is Preceptorship ?

Round table activity Pair Share

What is a preceptor? Brainstorm. How did you form these ideas? How does it differ from your role as a nurse? Can you see any conflicts with your current role or benefits?



Preceptorship

What is the role of the Preceptor?

- •Supervisor
- •Assessor
- •Advocate
- •Coach
- •Teacher
- •Liaison
- •Support
- Communicator
- •Negotiator
- •Collaborator



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Goal Setting

Individual activity

In the SMART format spend 5 minutes writing down 1 goal you have set for yourself this year.



SMART Goals

- **S** Specific
- M Measurable
- A Attainable
- **R** Realistic
- **T** Time Bound



Round table activity

Review of SMART Goals



Students Goal Setting and Expectations of the University

SCU

2 Professional Goals2 Personal goals

Griffith

3 Professional goals



What makes a good goal?

- Have they followed the SMART goal format and addressed the headings?
- Are they linked to the NMBA standards?
- Do they make sense when considering the learning outcome of the unit?
- Are they considerate of the healthcare environment they are in?
- Are they appropriate for their year/experience level?
- Can you understand them?
- Is it clear this is something they have thought about?

Don't forget to refer to them throughout the placement.



Nursing Program 2024

Nursing Curriculum 2024

- Based on a transformative, place-based approach.
- Full ANMAC accreditation.
- Placement at SCU is 640 840 hours minimum.
- Placement at Griffith is 640 880 hours minimum.
- SCU has placements that are 2 weeks 7 weeks
- Griffith has placements that are 2 weeks 4 weeks
- Primary care , acute care, aged care, rural and mental heath



What to do!

Planning

Prior to placement:

Review the documents sent by GCPHN.

Prior to placement your student should have:

- Called your workplace and introduced themselves
- Confirmed the placement site
- Provided the practice with their contact details
- Asked what they need to bring
- Enquired about logistics parking, bag storage etc.
- Shift times, including rosters
- Any recommended reading: such as policies or relevant information





What to do continued!

During the placement:

- <u>Set your expectations with the students</u>
- First day discuss the students' goals
- Observe the students in practice
- Discuss the students practice with them
- Look for learning opportunities
- Ensure students are being provided adequate supervision
- Debriefs/Feedback
- Check in check outs. Are they achieving their goals?
- Remember adult learning principles What type of learner are they?
- If you are concerned about a student's performance, contact the University. The earlier the better.

Southern Cross

Universit

- Complete the midway clinical assessments
- Meet with the student to discuss their midway assessments

What to do continued again ...

At the End of placement and After:

- Complete the final assessments and discuss this with the student.
- Any student that is underperforming should have been identified much earlier then this point. If a student is to fail the university should have already been be part of the discussion, with a GLP/CLP (Guided/Clinical learning plan) instated.
- Review the timesheet with the student to ensure completeness and accuracy
- Complete the final submissions of ANSATs
- If a student has been on a GLP/CLP sign and collect student signature. Upload the document to the ANSAT. Complete appropriate sections on the ANSAT.
- <u>Review reflections and tick off on the ANSAT tool</u>
- Please be aware students may ask you to be a referee



Student Issues

Please contact the GCPHN Clinical Placements team at clinicalplacements@gcphn.com.au and they will advise you on the procedures for either University.

It is vital that <u>any student performing below a 3</u> on the ANSAT, or not meeting the Code of Conduct is escalated immediately. Please don't wait. The more people involved the more likelihood the student will pass placement.



What we do to support Students

- Counselling, including out of hours.
- Incident reporting
- Academic support
- And much more

Please contact the GCPHN Clinical Placements team at clinicalplacements@gcphn.com.au if you feel any of your students require support.



Student Uniform

- Navy pants/skirt/culottes (No denim)
- Southern Cross University/Griffith University shirt or blouse
- Navy or black completely enclosed shoes (not joggers)
- Student ID Card (Holder collected from PEU)
- Hair short or tied back
- No jewelry only single plain wedding band.
- Please no fake eyelashes or fake nails (potential foreign body)



What do Students have to do on Placement?

- 1. Complete all hours
- 2. Satisfactory on the Professional Code of Conduct
- 3. Satisfactory for both Formative and Summative on the ANSAT plus overall SR
- 4. Completion of Clinical Teacher/Student Interview
- 5. Complete at least 1 reflection per week (due by the end of each week).
- 6. Successful completion of CORE Skills



What do if a Student misses hours?

Please follow the policy for the University and let the GCPHN Clinical Placements team know at clinicalplacements@gcphn.com.au to ensure the right procedures are followed.



Things Students may ask <u>SCU specific</u>

Where is my workbook located?

• On Blackboard – In the unit information

Where is my assessment located?

• On SONIA – Forms

Where do I submit my reflections?

• Via black board e-portfolio – then share with you. Students must invite you. Please do not accept emailed reflections.



2024 Scope of Practice Guidelines–Bachelor of Nursing and EN-RN Pathway

Professional Practices (NURS2012)

Health and Disability (NURS2013)

Health and Indigenous Australian

Continuation of all knowledge and

Assessment and management of

Respiratory assessment, care and

Investigations and diagnostics

Catheterisation (insertion/removal)

Care of clients with renal failure.

understanding the principles of

Fluid and electrolyte assessment, care

· Asepsis related to urinary care

S8 Medication administration (as a

third person checker - administration

Nephrostomy tubes, ureteric stents,

Complex wound management

skills from previous placements

Peoples (INDG2001)

chronic pain

documentation:

Oxygen therapy

ileal conduits

and documentation

Diabetic management:

Sliding scale insulin

as per hospital policy)

Models of disability care

Clinical reasoning cycle

microbiology

morbidity

Assessment and care of acute

depression – differentiation

Assessment and management

confused states in the elderly

Delirium states and dementia, and

intoxication and withdrawal states

Introduction to pathophysiology and

Mental health/illness/disorder as a co-

Stomal therapy

Urinary care:

dialysis

BGLs

Knowledge and Skills:

Grief, mourning and loss

Respiratory exercises

Promoting Wellness in Chronic



Units of Study:

Nursing Practices 3

placements

feeding

newborn

and families

Oncology care

Education in health

Mentoring

Delegation

Teamwork

Supervision

management

Complex patient care

ED/Crisis intervention

specialty clinical practice

Construction of nursing identity

Negotiation and conflict resolution

Leadership communication skills

Research and critique in everyday

specialty nursing practice

Case management and coordination

Resus 4 Kids

(NURS3001)

(WIL)

The Nurse as the Leader

(NURS3009/NURS3010)

Knowledge and Skills:

Triage observation and assist

and documentation

subcutaneous catheter

Maternal and infant nursing:

Assessment and care of the

Acute paediatric assessment, care.

intervention and documentation

Paediatric medication administration

Harm reduction, child protection and

Pandemic and disaster management

Understanding health care and health

promotions for children, young people

mandatory reporting (abuse and neglect)

Psychiatric emergencies and triage in the

Understanding of emergency procedures

Application and understanding of nursing

Burns management

Paediatric Health: Conception to Adolescence (NURS3008)

Continuation and consolidation of all

Trauma assessment, care, intervention

Syringe drivers, infusion pumps and

Postnatal assessment, care & breast

knowledge and skills from previous

1ST YEAR

2ND YEAR

Units of Study:

The Reflective Learner and Health Science Scholar (HLTH1004) Understanding Wellbeing and Mental Health (HLTH1005) Introductory Anatomy and Physiology (HBIO1009) Foundations of Interprofessional Health Practice (HLTH1006)

Knowledge and Skills:

- Infection Control Standard precautions including hand hygiene, PPE and signage
 Documentation:
- Health interview
- Application of anatomy and
- physiology knowledge Communication skills in various
- settings:
 Manual handling OH&S
- Skin assessment
- Falls risk assessment
- Ambulation of patients
- Sleep and rest
- Providing personal hygiene
 Bowel and bladder elimination
- Specimen collection Introduction to urinary catheter
- Fluid balance
- Legal and ethical practice
- Professional communication and interpersonal relationships
- Overview of the Australian health care
- Únderstanding of the health care workforce
- Historical perspectives of nursing and health care
- Introduction to mental health care in Australia
- Reflection on practice
- Cultural safety
- Consent and age of consent
- Introduction to emotional intelligence

Units of Study: Units of Study: Introductory Pharmacology (PHAR2001) Foundations of Clinical Practice Foundations of Health and Healthcare Systems (PBHL1003) Fundamentals of Nursing Practice Positive Approaches to Chronic Illness and Disability (NURS2014) Health and Indigenous Australian Peoples (INDG2001) (WIL) Partnering With Older People in Foundations of Health Assessment (NURS2004) (WIL) Healthcare (NURS2015)

(WIL)

Knowledge and Skills: Nutritional needs orally

- Assessment of feeding issues
- including swallowing and oral suctioning
- GIT assessment, care and
- documentation

(HLTH1007)

(NURS2015)

- Measuring and recording vital signs
- and BGLs Aseptic technique to assess simple
- wounds including:
 Donning and doffing
- Elimination
- A G assessment
- Numeracy calculating medication
- dosages oral and parenteral Medication administration:
- · Oral, topical, intra ocular, aural, inhalations
- Parenteral IM, subcut, intradermal Asepsis for medication admin
- Schedule of 2-4D (under direct RN)
- supervision) Student NOT to prepare or administer
- Schedule 8 medications Introduction to pharmacology
- The patient's story
- Death and dying
 Introduction to palliative assessment
- Introduction to quality, safety and human behaviours
- Growth and development across the
- Mental health narratives
- Introduction to mental health
- assessmen
- Development of therapeutic
- relationship Introduction to the clinical reasoning cycle

Units of Study: Introduction to Nursing Research (NURS2016)

Nursing Practices 1 (NURS2017) Building Healthy Communities Through Impactful Partnerships (NURS2018) (WIL) Mental Health Nursing (NURS2005) (WIL)

Knowledge and Skills: Continuation of all knowledge and

- skills from previous placements
- Community assessment
- Health promotion
- Assessment and management of
- acute wounds Management, asepsis and assessment
- of intravenous therapy using IV peripheral lines.
 - GIT assessment, care and documentation: Insertion & removal of NG tubes
 - Enteral feeding Preparation for, care of and documentation relevant to preoperative, intra-operative and post-operative journey through to
 - discharge. S8 Medication administration (as a third person checker - administration
 - as per hospital policy) Assessment of the client in the home
 - Australian screening programs Mental health assessment, risk
 - assessment & decision making Self-harm, overdose and suicide risk
- assessment.
- Assessment and management of personality disorders
- Psychopharmacology
- Awareness of palliative medications Intro to pharmacology in community
- context; polypharmacy and medication
- compliance
- Living and working with pain
 Related numeracy concepts
- Awareness of PICC lines

This scope of practice document is intended as a guideline ONLY. Students are required to be under the direct supervision of a RN at all times when on clinical placement. This RN is responsible for the patient and the activity in which the student engages. As such the RN should determine the student's understanding of the theory behind any activity that they undertake before allowing a student to deliver care. Queries or problems should be directed to the Clinical Teacher NB: It is expected that students will continue to incorporate the theory & acquired skills from previous units and sessions in their current clinical practicum.

- Health maintenance for vulnerable populations, including Indigenous
- Peoples Home visitations & patient education

(HLTH3005) Knowledge and Skills:

Continuation of all knowledge and skills from previous placements

Units of Study:

(NURS3006)

(WIL)

- IV medication and fluid management Understanding management of CVADs
 - (i.e., PICC lines, central venous lines and portocath)

Evidence-based Practice in Nursing

Nursing Practices 2 (NURS3007)

Transition to Practice (HLTH3004)

Interprofessional health practice

- Advanced haemodynamic monitoring Sepsis screening
- Advanced Respiratory Assessment, Clinical Management, Intervention and
- Documentation Understand the management of ICCs and UWSDs
- Acute coronary syndrome clinical management, intervention and documentation
- Cardiac monitoring, assessment, care and documentation
- ECG recording, monitoring and
- interpretation Neurological assessment, care and
- documentation Neurovascular assessment, care and
- documentation LOC/ICP/acute SCI

and documentation

Awareness of TPN

Advanced/complex wound

Haematology assessment and

transfusion of blood products

documentation

management

-induced psychosis

Root cause analysis

- Cranial nerve and special senses assessment
- Sensory assessment, care and documentation Endocrine assessment, care, intervention and documentation.

Urinary assessment, care, intervention

ENT assessment, care, intervention

Understanding PCA management,

and documentation, bladder irrigation

GIT assessment, care, intervention and

patient education and documentation

Parenteral (TPN) fluid administration

S8 Medication administration (as a third person checker - administration as per hospital policy) Research and critique/incorporating research into everyday nursing care

Preparation for graduate practice

Assessment and management of drug

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

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

Year 1 Bachelor of Nursing student learner

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

Student expectation of the placement experience

1. Students expect Registered Nurses will facilitate their learning 2.Students expect to be buddled 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

 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

carry out complex invasive interventions/procedures e.g.

procedures, and understanding the nursing care of people

assessment and planning, delivery of simple invasive

•care of the person with a chronic illness including

administer S8 medications intravenously

Theoretical studies in Year 2 focus on:

•care of the person with an acute illness

Second year students do not

living with different diseases

care of the child and family

CVAD dressings

mental illness

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

First year students do not

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

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:

LIMITATIONS

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

Supporting Student Learning

- Feedback
 - Timely, constructive, setting, be prepared, a few clear points, think about terminology, objective comments, be aware of the way you deliver the information, specific, balanced, open, monitor for understanding.
- Role modelling
- Communication verbal and non-verbal
- Prepare the student for the different scenarios they will be involved in.
- Facilitate self directed learning encourage self reflection and assessment
- Encourage deep learning through task engagement critical thinking/ linking to known concepts and principles
- Adapt to student learning level/ style/ needs

Feedback – Carolyn Salter UTAS <u>https://supportingstudents.org.au/giving-feedback/workshop-delivering-constructive-feedback.html</u> ClinEdAus Feedback <u>https://www.clinedaus.org.au/topics-category/providing-feedback-to-students-on-placement-52</u>



Strategies to Support Students

Strategies to Support develop clinical decision-making skills:

- Actively encourage reflective practice
- Use coaching questions to enable the student to reach their own conclusion
- Consider structured decision-making support tools
- Learner centred feedback and
- Clinical educators articulating their decision-making and clinical reasoning

Hints

- Remember the fundamentals: hygiene, infection control, patient communication, consent and introductions.
- Integrate theory and practice.
- Provide opportunities to practice skills.
- Use collaborative problem solving.

ClinEd Aus

https://www.clinedaus.org.au/topics-category/facilitating-clinical-decision-making-and-102

https://www.clinedaus.org.au/topics-category/facilitating-learning-on-student-placements-47#Adultlearningprinciples



Assessment Tool (ANSAT)

- Clinical Placement Assessment Tool
- Formative and Summative Sections

 Formative: Midway through placement
 Summative: Conclusion of placement
- Based on the Nursing Standards
- Graded 1-5 per standard
 Must achieve a 3 in each standard



Clinical Assessment Tool - Timesheet

STUDENT DETAILS	Red Star	
Student Name:	🖋 • Student Code:	•
Site Name:	Placement Dates:	•

STUDENT ATTENDANCE

Please submit 1 Timesheet per allocated day of placement - including any days not attended. The process is:

> submit Timesheet/s by clicking + Add new timesheet and complete the details;

> click the Confirm Timesheet Submission Button below the Timesheet field;

> icons will appear in the timesheet field > Action column. Approve timesheets by clicking the green tick/s.

Click the Confirm Timesheet Submission Button to save approvals.

Drag and drop the T	ïmesheet Status (column to gro	oup by it							
Date 🔻	Time In 🔻	Break (min)	Time Out	Duration	Unit	Activity	Sub activity	Competency	Attendance Status	Comment
No data										
<										

Save Draft Confirm Timesheet Submission



Code of Conduct



CODE OF CONDUCT

The Code of Conduct for Nurses (the code) sets out the legal requirements, professional behaviour and conduct expectations for nurses in all practice settings, in Australia and identifies the minimum standards of professional conduct in practice. Students must demonstrate achievement of each of these standards to satisfy the requirements of each professional experience placement. Further details. The Code of Conduct for Nurses includes the below domains, principles and values:

DOMAIN DESCRIPTION	PRINCIPLE DESCRIPTION	
Practise legally	Legal compliance - Nurses respect and adhere to their professional obligations under the National Law, and abide by relevant laws.	
Practise safely, effectively and collaboratively	Person-centred practice - Nurses provide safe, person-centred and evidence-based practice for the health and wellbeing of people and, in partnership with the person, promote shared decision-making and care delivery between the person, nominated partners, family, friends and health professionals.	
	Cultural practice and respectful relationships - Nurses engage with people as individuals in a culturally safe and respectful way, foster open and honest professional relationships, and adhere to their obligations about privacy and confidentiality.	
Act with professional integrity	Professional behaviour - Nurses embody integrity, honesty, respect and compassion.	
	Teaching, supervising and assessing - Nurses commit to teaching, supervising and assessing students and other nurses, in order to develop the nursing workforce across all contexts of practice.	J
	Research in health - Nurses recognise the vital role of research to inform quality healthcare and policy development, conduct research ethically and support the decision- making of people who participate in research.	
Promote health and wellbeing	Health and wellbeing - Nurses promote health and wellbeing for people and their families, colleagues, the broader community and themselves and in a way that addresses health inequality.	;

CODE OF CONDUCT QUESTION	FORMATIVE CODE OF CONDUCT ASSESSMENT	SUMMATIVE CODE OF CONDUCT ASSESSMENT	
Does the Student satisfy the Code of Conduct for Nurses requirements?	Oyes ONo 🖋 •	OYes ONo ₽•	
If No, identify the domain and provide details below. Refer Student to local SCU Lecturer Practitioner for further intervention and support.			
Use the buttons to the right to save either Formative or Summative entries.	Save Draft Submit Formative	Save Draft Submit Summative	

ANSAT



4. Comprehensively Conducts Assessments		
Completes comprehensive and systematic assessments using appropriate and available sources	○1 ○2 ○3 ○4 ○5 ○N/A 🖋・	○1 ○2 ○3 ○4 ○5 ○ N/A 🖋 •
Accurately analyses and interprets assessment data to inform practices	O1 O2 O3 O4 O5 ON/A ♂•	01 02 03 04 05 0 N/A ♂•
5. Develops a Plan for Nursing Practice		
 Collaboratively constructs a plan informed by the patient/client assessment 	○1 ○2 ○3 ○4 ○5 ○N/A 🖋・	○1 ○2 ○3 ○4 ○5 ○N/A 🖋•
Plans care in partnership with individuals/significant others/health care team to achieve expected outcome	s ○1 ○2 ○3 ○4 ○5 ○N/A 🖋・	○1 ○2 ○3 ○4 ○5 ○N/A 🖋・
6. Provides Safe, Appropriate and Responsive Quality Nursing Practice		
Delivers safe and effective care within scope of practice to meet outcomes	○1 ○2 ○3 ○4 ○5 ○N/A 🖋 •	○1 ○2 ○3 ○4 ○5 ○ N/A 🖋 •
Provides effective supervision and delegates care safely within their role and scope of practice	○1 ○2 ○3 ○4 ○5 ○N/A 🖋・	○1 ○2 ○3 ○4 ○5 ○N/A 🖋・
 Recognises and responds to practice that may be below expected organisational, legal or regulatory standards 	○1 ○2 ○3 ○4 ○5 ○N/A 🖋・	○1 ○2 ○3 ○4 ○5 ○N/A 🖋 •
7. Evaluates Outcomes to Inform Nursing Practice		
Monitors progress towards expected goals and health outcomes	○1 ○2 ○3 ○4 ○5 ○N/A 🖋 •	○1 ○2 ○3 ○4 ○5 ○ N/A 🖋 •
 Modifies plan according to evaluation of goals and outcomes in consultation with health care team and others 	O1 O2 O3 O4 O5 ON/A ♂•	O1 O2 O3 O4 O5 ON/A ♂•
GLOBAL RATING SCALE: In your opinion as an assessor of student performance, <u>relative to their stage of</u> <u>practice</u> , the overall performance of this student in the period was:	○ Unsatisfactory ○ Limited ○ Satisfactory ○ Good ○ Excellent 🖋 •	○ Unsatisfactory ○ Limited ○ Satisfactory ○ Good ○ Excellent 🖋 •
Please confirm that the appropriate assessment was discussed with the student prior to submitting this Form section:	Oyes ONo ₽•	Oyes ONo Ø.►
Is additional paperwork required from Student?	Oyes ONo 🖋 •	Oyes ONo 🖋 •
At this point does the student require referral to local SCU Lecturer Practitioner for further support or intervention?	Oyes ONo ₽•	Oyes ONo ₿•
Use the buttons to the right to save either Formative or Summative selections.	Save Draft Submit Formative	Save Draft Submit Summative

- 1. THINKS CRITICALLY AND ANALYSES NURSING PRACTICE
- <u>Complies and practices according to relevant legislation</u> and local policy
- Follows policies and procedures of the facility/organisation (e.g. workplace health and safety / infection control policies)
- Maintains patient/client confidentiality
- Arrives fit to work
- Arrives punctually and leaves at agreed time
- Calls appropriate personnel to report intended absence
- Wears an identification badge and identifies self
- Observes uniform/dress code
- Maintains appropriate professional boundaries with patients/clients and carers
- Uses an ethical framework to guide their decision making and practice
- Understands and respects patients'/clients' rights
- Allows sufficient time to discuss care provision with patient/clients
- Refers patients/clients to a more senior staff member for consent when appropriate
- Seeks assistance to resolve situations involving moral/ethical conflict
- Applies ethical principles and reasoning in all health care activities
- Demonstrates respect for individual and cultural (including Aboriginal & Torres Strait Islander) preference and differences
- Practices sensitively in the cultural context
- Understands and respects individual and cultural diversity
- Involves family/others appropriately to ensure cultural/spiritual needs are met
- Sources and critically evaluates relevant literature and research evidence to deliver quality practice
- Locates relevant current evidence (e.g. clinical practice guidelines and systematic reviews, databases, texts)
- Clarifies understanding and application of evidence with peers or other relevant staff
- Applies evidence to clinical practice appropriately

- Participates in quality activities when possible (e.g. assists with clinical audit, journal club)
- Shares evidence with others
- Maintains the use of clear and accurate documentation
- Uses suitable language and avoids jargon
- Writes legibly and accurately (e.g. correct spelling, approved abbreviations)
- Records information according to organisational guidelines and local policy

2. ENGAGES IN THERAPEUTIC AND PROFESSIONAL RELATIONSHIPS

- Communicates effectively to maintain personal and professional boundaries
- Introduces self to patient/client and other health care team members,
- Greets others appropriately
- Listens carefully and is sensitive to patient/client and carer views
- Provides clear instructions in all activities
- Uses a range of communication strategies to optimise patient/client rapport and understanding (e.g. hearing impairment, non-English speaking, cognitive impairment, consideration of non-verbal communication)
- Communication with patient/client is conducted in a manner and environment that demonstrates consideration of confidentiality, privacy and patient's/client's sensitivities
- Collaborates with health care team and others to share knowledge that promotes person-centred care
- Demonstrates positive and productive working relationships with colleagues
- Uses knowledge of other health care team roles to develop collegial networks
- Demonstrates a collaborative approach to practice
- Identifies appropriate educational resources (including other health professionals)
- Prioritises safety problems

- Participates as an active member of the healthcare team to achieve optimum health outcomes
- Collaborates with the health care team and patient/client to achieve optimal outcomes
- Contributes appropriately in team meetings
- Maintains effective communication with clinical supervisors and peers
- Works collaboratively and respectfully with support staff
- Demonstrates respect for a person's rights and wishes and advocates on their behalf
- Advocates for the patient/client when dealing with other health care teams
- Identifies and explains practices which conflict with the rights/wishes of individuals/groups
- Uses available resources in a reasonable manner
- Ensures privacy and confidentiality in the provision of care

3. MAINTAINS THE CAPABILITY FOR PRACTICE

- Demonstrates commitment to lifelong learning of self and others
- Links course learning outcomes to own identified learning needs
- Seeks support from others in identifying learning needs
- Seeks and engages a diverse range of experiences to develop professional skills and knowledge
- Supports and encourages the learning of others
- <u>Reflects on practice and responds to feedback for</u> <u>continuing professional development</u>
- Reflects on activities completed to inform practice
- Plans professional development based on reflection of own practice
- Keeps written record of professional development activities
- Incorporates formal and informal feedback from colleagues into practice
- Demonstrates skills in health education to enable people to make decisions and take action about their health
- Assists patients/clients and carers to identify reliable and accurate health information

- Patient/client care is based on knowledge and clinical reasoning
- Refers concerns to relevant health professionals to facilitate health care decisions/delivery
- Provides information using a range of strategies that demonstrate consideration of patient/client needs
- Prepares environment for patient/client education including necessary equipment
- Demonstrates skill in patient/client education (e.g. modifies approach to suit patient/client age group, uses principles of adult learning)
- Educates the patient/client in self-evaluation
- <u>Recognises and takes appropriate action when capability</u> <u>for own practice is impaired</u>
- Identifies when own/other's health/well-being affect safe practice
- Advises appropriate staff of circumstances that may impair adequate work performance
- Demonstrates appropriate self-care and other support strategies (e.g. stress management)
- Demonstrates accountability for decisions and actions appropriate to their role
- Provides care that ensures patient/client safety
- Provides rationales for care delivery and/or omissions
- Sources information to perform within role in a safe and skilled manner
- Complies with recognised standards of practice

4. COMPREHENSIVELY CONDUCTS ASSESSMENTS

- Completes comprehensive and systematic assessments using appropriate and available sources
- Questions effectively to gain appropriate information
- Politely controls the assessment to obtain relevant information
- Responds appropriately to important patient/client cues
- Completes assessment in acceptable time
- Demonstrates sensitive and appropriate physical techniques during the assessment process
- Encourages patients/clients to provide complete information without embarrassment or hesitation

- Accurately analyses and interprets assessment data to inform practice
- Prioritises important assessment findings
- Demonstrates application of knowledge to selection of health care strategies (e.g. compares findings to normal)
- Seeks and interprets supplementary information, (e.g. accessing other information, medical records, test results as appropriate)
- Structures systematic, safe and goal oriented health care accommodating any limitations imposed by patient's/client's health status

5. DEVELOPS A PLAN FOR NURSING PRACTICE

- Collaboratively constructs a plan informed by the patient/client assessment
- Uses assessment data and best available evidence to construct a plan
- Completes relevant documentation to the required standard (e.g. patient/client record, care planner and assessment, statistical information)
- Considers organisation of planned care in relation to other procedures (e.g. pain medication, wound care, allied health therapies, other interventions)
- Plans care in partnership with individuals/significant others/health care team to achieve expected outcomes
- Collaborates with the patient/client to prioritise and formulate short and long term goals
- Formulates goals that are specific, measurable, achievable and relevant, with specified timeframe
- Advises patient/client about the effects of health care

6. PROVIDES SAFE, APPROPRIATE AND RESPONSIVE QUALITY NURSING PRACTICE

- Delivers safe and effective care within their scope of practice to meet outcomes
- Performs health care interventions at appropriate and safe standard
- Complies with workplace guidelines on patient/client handling
- Monitors patient/client safety during assessment and care provision
- Uses resources effectively and efficiently

- Responds effectively to rapidly changing patient/client situations
- Provides effective supervision and delegates safely within their role and scope of practice
- Accepts and delegates care according to own or other's scope of practice
- Seeks clarification when directions/decisions are unclear
- Identifies areas of own or other's practice that require direct/indirect supervision
- Recognises unexpected outcomes and responds appropriately
- Recognise and responds to practice that may be below expected organisational, legal or regulatory standards
- Identifies and responds to incidents of unsafe or unprofessional practice
- Clarifies care delivery which may appear inappropriate
- 7. EVALUATES OUTCOMES TO INFORM NURSING PRACTICE
- Monitors progress towards expected goals and health outcomes
- Refers patient/client on to other professional/s
- Begins discharge planning in collaboration with the health care team at the time of the initial episode of care
- Monitors patient/client safety and outcomes during health care delivery
- Records and communicates patient/client outcomes where appropriate
- Modifies plan according to evaluation of goals and outcomes in consultation with relevant health care team and others
- Questions patient/client or caregiver to confirm level of understanding
- Updates care plans/documentation to reflect changes in care
- Uses appropriate resources to evaluate effectiveness of planned care/treatment

Core Skills SCU specific



Core Skills

In the clinical setting the clinical teacher is to assess the student's level of knowledge and clinical safety relevant to their scope of practice. Any concerns in the performance of these skills should be acted upon early in the placement.
Have any concerns been identified in the performance of core skills in accordance with the student's level of education?
 Examples: Infection control - standard precautions, hand hygiene, aseptic technique, sharps management Patient assessment - vital signs, recognition of deviation from normal Professional communication and interprofessional relationships - therapeutic, interprofessional, clinical handover/ISBAR, written and/or electronic documentation Patient Load and time management*: Patient load guide** 1st Year: 1-2 patients 2nd Year: 2-4 patients 3rd Year: 4 or more patients
©Yes ⊙No
If Yes, provide comment on the core skill in assessor formative feedback.
(Contact local SCU Lecturer Practitioner if student requires additional support)
* To successfully develop optimal time management skills, it is expected that students work towards fully undertaking the RN role, including taking responsibility for the total care management of a group of patients (patient load). The level of responsibility increases with student experience across the program. Time management includes planning care, attending to clinical care, prioritising work appropriately, completion of documentation and the use of a time management tool. Other skills associated with the role of RN include effective communication skills and clinical handover

**The patient load of the student should be appropriate to the healthcare setting and level of patient acuity.





CLINICAL TEACHER	FEEDBACK			
te: Feedback should include pro	fessional and personal attributes. Click or	link for further information an	d guidelines on student comments	
ORMATIVE FEEDBACK UESTIONS	FORMATIVE COMMENT	7	SUMMATIVE FEEDBACK QUESTION	
. What is the student doing vell and how can this be ustained?		•	 What has the student done well throughout this placement? 	?
. What can be improved and ow will this be achieved?		•	2. What strategies can the student use to advance their learning in future placements?	
. Plans for learning and meframes for achievement		•	3. Any further comments?	
se the button to the right to ave the Formative Feedback ntries.	Save Draft Submit Formative		Use the button to the right to save Summative Feedback entries.	Save Draft Submit Summative



Summative Assessment

GLOBAL RATING SCALE – In your opinion as an assessor of student performance, <u>relative to their stage of practice</u>, the overall performance of this student in the <u>summative</u> period was:

Unsatisfactory O Limited O Satisfactory O Good O Excellent

SUMMATIVE ASSESSMENT DISCUSSED WITH STUDENT? Please discuss this assessment with the student prior to submitting this form. Click on 'Save Draft' below if you would like to do this at a later point.	©Yes ©No
If you haven't discussed the assessment with the student, please detail the reasons in Assessor Feedback.	
ADDITIONAL PAPERWORK REQUIRED FROM STUDENT?	©Yes ©No

Reflections- Overall result:	SR ● NSR ● INCOMPLETE
Guided Learning Plan - Overall result:	○ N/A ○ SR ○ NSR ○ INCOMPLETE

Additional documents:

Please upload completed guided learning plans and any additional placement documents (e.g. incident reports) here



Other Items

OTHER ITEMS		
ITEM DESCRIPTION	ITEMS / ASSESSMENT	
Upload Guided Learning Plan:	Documents 💉	
Clinical Teacher assessment of Guided Learning Plan Overall Result:	○ N/A ○ SR ○ NSR ○ INCOMPLETE 🖋 •	
Any other items that should be uploaded (e.g. incident documentation):	Documents 🖋	
Have Student Reflections been submitted to Clinical Teacher?	Oyes ONo 🖋 ·	
Use the button to the right to save Other Items.	Save Draft Submit	

FULLY COMPLETE FORM

hen you have fully completed all sections of this Form, please click the below Fully Complete Button. The Form will be sent to the School for Unit Assessor review.





Student: List

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4	1 🕨 🕨	Page size: 25	•										1	items in 1 pages

Hint: Check the date in the Hide placements before box if you can't see your students.

SONIA: Forms



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Challenging Students

Unsatisfactory Performance

- Discuss concerns with student and develop strategies for improvement
- No improvement or has not taken on feedback contact the GCPHN Clinical Placements Team

Difficult conversations

- Develop a plan clear on intention or purpose
- Emotional intelligence role of emotions in communication
 - Self awareness, social awareness, self management and social skills/ relationship management – decision making and adaption
- Think about the environment and timing of conversation
- Find out the facts or alternate explanations
- Link to standards, code of conduct, policies
- Document the discussion and outcome so all parties clear
- If you are going to give your student a numerical rating less than 3, you should have already sought support from the University.

Quality of Care issues

• Sensitivity and professionalism



Reflection <u>SCU specific</u>

- One reflection per week required using the SPROUT framework.
- Preceptor reviews each week and provides feedback.
- Opportunity to open a dialogue with the student on their experience and see their level of thinking.
- May be from a clinical experience, a task, or a personal experience.
- Must relate to the student's current clinical placement.
- Reflections are to be completed in the student's ePortfolio and "shared" with the Preceptor .
- Reflections MUST be completed and sighted by the preceptor weekly
- If the student fails to submit the reflection please notify the unit assessor.



SPROUT reflections <u>SCU specific</u>

- S Situation. Describe your actions, thoughts and feelings during the situation
- P Past experiences. How have these impacted on the way you responded to the situation?
- **R** Research/ Read. This could include policies, peer reviewed literature, procedures
- O Other influences. These may include self and others internal or external
- **U** Understanding. Including reconsidering your beliefs and values
- **T** Take forward. How will this influence future practice and beliefs?



What makes a good SPROUT reflection? SCU specific

- Have they followed the SPROUT format?
- Is their reflection clear and well structured?
- Is their reflection purposeful, logical, and will it result in personal growth?
- Have they ensured that they maintained professional standards including confidentiality.
- Have they demonstrated further reading?
- Have they shown deep personal reflection and introspection?
- Is relevant to nursing and healthcare delivery in the clinical placement environment?

For the purpose of clinical placement reflection is NOT:

- A diary entry or only a description of an event
- A time to vent



Some resources for you.

• ClinEd Aus

https://www.clinedaus.org.au/topics-category/after-the-placement-

evaluation-and-reflection-101

• ClinEd Aus: Core clinical Education Skills

https://www.clinedaus.org.au/topics-category/core-clinical-educationskills-35

National Placement Evaluation Centre

https://npec.org.au/

Australian Nursing Standards Assessment Tool

https://www.ansat.com.au/

• Support for Supervisors

https://supportingstudents.org.au/

Learning and teaching, Culture and Language, Clinical reasoning cycle and Feedback



Thank you for listening



Any Questions?