

Student Placement Project

VHA
Clinical Governance Forum
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Project Brief

- ❑ **Maximise** student placements in CHCs
 - ❑ Develop a **model** of inter-professional clinical practice and supervision
 - ❑ Develop certainty through improved **coordination** in the placement process
 - ❑ Map the **current placement** processes
 - ❑ **Streamline** relationships
 - ❑ Analyse the **infrastructure** requirements
 - ❑ Enable access to a **web-based** system
 - ❑ Determine the resources required to deliver the recommended model, and identify how the model can be **sustained** post the pilot phase.
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Project Process

- ❑ Governance Group
 - Monthly meetings
 - 9 members, 5 CHC + 4 LaTrobe
 - ❑ Steering Group
 - 3 meetings
 - 20 members from education, CHCs, PCP, Div GP, VHA
 - ❑ Working Groups
 - Mapping
 - Supervision and Clinical Education
 - Information Management Systems
 - Sustainability and Infrastructure
 - ❑ Project Manager 0.6 EFT auspiced by DGCHS
 - ❑ Regular meetings with and reports to DHS
 - ❑ Final Report submitted to DHS in August 2008
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Project Progress

1. Mapping

- Surveys undertaken across NW Metro area
 - Analysis of data
 - Individual agency and overall reports completed
 - Process has led a number of agencies to undertake reviews
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Project Progress

2. Supervision and Clinical Education

- Training strategy devised
 - Training providers considered
 - Costs established
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Project Progress

3. Information Management Systems

- A number of data bases were examined for suitability
 - Further options being explored by universities
 - Focus is also on how technology can be used to facilitate student learning and how students can be prepared to work in a Health Smart environment
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Project Progress



4. Sustainability and Infrastructure

- Considered costs and ways to fund model in the short and longer term
- Modelled different cost distribution scenarios

Snapshot Student Numbers in 2007



These figures reflect data collected in NW Region.
Actual numbers may vary slightly.

Institution	Student Numbers
La Trobe University	136
Victoria University	38
University of Melbourne	29*
Monash University	29
RMIT	13
Other University (includes Deakin, ACU & Charles Sturt)	43
TAFE	18
TOTAL	306

*Excludes dental

Proposed model - Aims



1. **Regional coordination** and planning of student placements for community health and university perspectives
2. Increase the **capacity of Community Health** Services to take additional numbers of students on placement
3. Ensure and enhance the **quality of learning** opportunities for students who undertake placements in Community Health
4. Contribute to the **future workforce needs** of the Community Health Sector by contributing to student education and providing students with positive experiences of the community health sector

Capacity building in Community Health



- Do you know the who, how, where and why of student placements that take place?
 - Very difficult to be strategic or to establish change with no benchmark
 - OHS and risk management consideration
 - Consider establishing a register of students so that this information is readily accessible.

Capacity building in Community Health



- Consider students in your planning processes
 - Mapping exercise indicated this was not done often
 - If you align student placements with particular priorities (strategic, health promotion...) in your organisation they can become more valuable.

Capacity building in Community Health



- Training in student supervision
 - Staff training can make a real difference to staff willingness, confidence and competence in taking on students.
 - There are a number of available courses and universities frequently run half day sessions for supervising staff
 - Assists staff who are interested in moving into leadership roles

Capacity building in Community Health



- Encourage staff at all levels of experience to take on students.
- Mapping exercise found significant differences between organisations in the experience level of supervisors
- Students often respond particularly well to being supervised by junior staff who may be overlooked as suitable supervisors
- Aim for a balance

Capacity building in Community Health



- Review and update your policy
 - Good policies ...
 - Outline the organisation's philosophy in taking students
 - Give a clear indication of which students the organisation will and will not take and the process for organising placements
 - Delineate roles and responsibilities
 - Facilitate the occurrence of placements with minimal duplication and disruption to core business

Capacity building in Community Health



- Consider coordinating orientation processes
 - Students undertaking placements at a given time of year can go through orientation together
 - Time and resource savings for the organisation

Capacity building in Community Health



- Position descriptions for students
 - Actively recruit to particular positions so that students can come into your organisation with a genuine and valuable role
 - Expectations are clearer
 - You have a tool against which to assess students performance

Capacity building in Community Health



- Develop strong relationships with tertiary institutions in your area
 - Many services took students from everywhere – reduce number of partner organisations without becoming exclusive
 - Consider a strategic approach
 - Streamline and strengthen relationships these so that you can develop partnerships to respond to specific needs and projects

Capacity building in Community Health



- Universities are looking for new and innovative placement models
 - Placements do not have to be discipline specific
 - Placements do not always have to be supervised by a clinician from the same discipline
 - Groups of students can work well to complete some projects and activities

Capacity building in Community Health



- Reviewed the way in which requests for placements circulate in your organisation
 - In many cases they may not get to staff who might be able to offer project based placements in new and innovative areas
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Potential returns to CHSs



- Offers the opportunity to showcase organisations and recruit health professionals in the future
 - Contributes to the pool of trained health professionals
 - Addresses risk management and OHS issues
 - Offers more certainty in the placement process
 - Reduces some of the administrative burden of organising and managing placements
 - Provides the opportunity to develop stronger partnerships with universities
 - Enhances the skill level of CH staff by offering them additional training and opportunities
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