Introduction to clinical practice

The staff of the School of Nursing & Midwifery at Flinders University have prepared this guide to provide an overview of policies and procedures surrounding the clinical practice components of programs of undergraduate and postgraduate study. This should assist students, academics, and clinicians in recognising not only the philosophy underpinning clinical practice but also the dynamics of its organisation.

Of particular importance to all parties is the articulation of the philosophy underpinning clinical practice in this School and the School’s relationship with its clinical partners. Students are advised to pay particular attention to their responsibilities in relation to pre-clinical preparation, orientation to venue, the clinical placement and post-clinical experiences.

Key features and principles of teaching and learning in the clinical setting

Integration of theory into practice throughout each topic of the curriculum is fundamental to all practice-based programs in the School of Nursing & Midwifery. There are a number of philosophical underpinnings to clinical learning which are incorporated in key features and principles of teaching and learning. They are applicable to any model of clinical placement. The following are the teaching and learning expectations of all clinical learning environments:

- a focus on student learning will be incorporated through consultation, negotiation, flexibility and responsiveness to student learning needs
- participants will develop mutually trusting relationships
- students will undertake clinical practice under the direct supervision of the RN or RM
- quality of care is paramount
- students, clinicians and academics feel valued and supported
- peer teaching and learning is encouraged and valued
- feedback is formative, summative and ongoing
- flexible methods of learning and assessment are utilised
• self-regulation of clinical practice will be through the use of portfolio or reflective learning log
• allocation of patient load should be commensurate with the student’s skill and ability
• the student should always work closely with an RN or RM and not be overwhelmed with the number or complexity of clients.

Models of clinical placement

The Dedicated Education Unit (DEU) is the School’s preferred placement model for undergraduate nursing students; however, there are many more students than there are DEU placements, so all students may expect to undertake both DEU and block placements during their 3-year program. Students remain supernumerary throughout the entire clinical experience.

➢ The DEU (Dedication Education Unit) placement model

The DEU placement model is a teaching strategy implemented within the clinical practice component of nursing topics in the first, second and third year of the pre-registration undergraduate nursing program. This model involves the allocation of students to a clinical venue for the duration of their clinical experience. The length of time is dependent on year level. Learning in the venue is supported by a clinical facilitator (employed by the University) and the clinical staff.

➢ Block clinical placement model

A block placement may be used for nursing and midwifery students where a student will undertake a continuous block of time (e.g. 4 days per week over 4 weeks or 5 days week over 5 weeks). A clinical facilitator is allocated to supervise this placement.

➢ Midwifery clinical placement model

In the first year midwifery students will undertake a clinical placement in a nursing venue. For second and third year midwifery students, clinical placement is undertaken in a variety of maternity settings.
Peer teaching and learning strategies

Building upon the theme of ‘students learning how to learn’, peer teaching/learning in the practice environment is promoted. In these situations:

... the teacher's role is only concerned with monitoring progress and timely intervention and the responsibility for learning rests with the student. (While 1991, p. 449)

Peer teaching/learning moves away from the dominant behaviourist approach of traditional education and is more consistent with humanistic philosophy, which supports equality of participants (Goldenberg & Iwasiw 1992). In peer teaching/learning situations students are encouraged to move away from reliance on the teacher and to view each other as:

... trusted learning resources ... who have valuable ideas, experiences and insights to share and from which to learn. (Goldenberg & Iwasiw 1992, p. 27)

Students report that peer teaching prepares them for their expected role as a teacher of others when they became registered nurses (Longson, Orrell, Edgecombe & Gonda 1997). Peer teaching/learning is initially implemented in the DEU by strategically ‘buddying’ students with each other; specifically a 2nd year student with a 3rd year or a 1st year student with a 2nd year. There is no onus on either to teach, instead the relationship is collegial where learning occurs opportunistically through discussion, exploration and combined reflection. As students gain confidence and competence, they separate and take on individual clinical loads; however, the collegial relationship remains, as each uses the other as a supportive resource. While this is the ideal, there will be instances when the opportunity for peer teaching is limited or inadvisable.

Evaluation of clinical placements

Evaluation of clinical placements occurs on a regular basis. This evaluation may incorporate the perspective of clinicians, students and academics. Outcomes of these evaluations are used to improve aspects of the process in relation to clinical learning environments.