

Public consultation response template – draft guidance on embedding good practice in clinical placements, simulation-based learning and virtual care in initial student health practitioner education

April 2024

Please provide any feedback on the draft guidance using this template, including your responses to all or some of the questions in the text boxes on the following pages. The boxes will expand to accommodate your response. You do not need to respond to a question if you have no comment.

Making a submission

Send the completed response template to AC_consultation@ahpra.gov.au using the subject line 'Feedback – public consultation on good practice guidance for clinical placements, simulation-based learning and virtual care'.

Submissions are due by close of business (AEST) 21 June 2024.

Publication of submissions

At the end of the consultation period, submissions (other than those made in confidence) will be published on the Accreditation Committee's website to encourage discussion and inform the community and stakeholders about consultation responses.

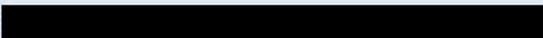
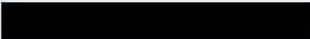
We can accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982 (Cth)*, which has provisions designed to protect personal information and information given in confidence. **Please let us know if you do not want us to publish your submission or want us to treat all or part of it as confidential.**

We will not place on the website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation. Before publication, we may remove identifying information from submissions, including contact details.

The views expressed in the submissions are those of the individuals or organisations who submit them, and their publication does not imply any acceptance of, or agreement with, these views by the review.

Published submissions will include the names of the individuals and/or the organisations that made the submission, unless confidentiality is requested. If you do not wish for your name and/or organisation's name to be published, please use the words '**Confidential submission**' in the subject title when emailing your submission.



Initial questions
<i>To help us better understand your situation and the context of your feedback please provide us with some details about you. These details will not be published in any summary of the collated feedback from this consultation.</i>
Question A Are you completing this submission on behalf of an organisation or as an individual?
Your answer: <input checked="" type="checkbox"/> Organisation Name of organisation:  Contact email:  <input type="checkbox"/> Myself Name: Click or tap here to enter text. Contact email: Click or tap here to enter text.
Question B If you are completing this submission as an individual, are you: <input type="checkbox"/> A registered health practitioner? Profession: Click or tap here to enter text. <input type="checkbox"/> A member of the public? <input type="checkbox"/> Other: Click or tap here to enter text.
Question C Would you like your submission to be published? <input type="checkbox"/> Yes, publish my submission with my name/organisation name <input checked="" type="checkbox"/> Yes, publish my submission without my name/ organisation name <input type="checkbox"/> No – do not publish my submission

Your responses to the consultation questions

1. Do you have any comments on the good practice statements in the guidance?		
Please add your comments to the following table and add a new row for each good practice statement you have a comment for.		
Guidance	Good practice statement	Comments or suggestions
<p><i>Example:</i></p> <p>Clinical placements <input checked="" type="checkbox"/></p> <p>Simulation-based learning <input type="checkbox"/></p> <p>Virtual care <input type="checkbox"/></p>	<p>A comprehensive list of key recommendations based on evidence. This is very helpful.</p> <p>Clinical placements are valuable learning opportunities when they consist of learning activities that prepare students for practice in the real world and require students to actively participate.</p>	<p>Critical thinking, reflective practice, communication and time management are essential non-clinical attributes for successful clinical placement. We suggest those attributes should be considered prior to clinical placement, and can be further developed during their placement.</p> <p>Suggestions:</p> <ul style="list-style-type: none"> - Page 6 of 12: the 3rd dot point and point 11 are very similar so please consider combining these two. - Page 7 of 12, point 10: to add “when applicable” at the end of “understand the expectations for student assessment and evaluation” since not all the clinical supervisors will be involved in the assessment. - Page 7 of 12, move point 13 to 14 and add another point 13 to indicate: “be holding a current Ahpra registration in the same division where they provide the clinical supervision to students”. - Page 8 of 12, point 2 can be deleted since it should be part of training indicated in point 1 (page 7 of 12).
<p>Clinical placements <input type="checkbox"/></p> <p>Simulation-based learning <input checked="" type="checkbox"/></p> <p>Virtual care <input type="checkbox"/></p>	<p>A comprehensive list of key recommendations based on evidence. This is very helpful.</p> <p>It is good to see simulation-based learning is formally recognised as part of clinical training.</p>	<p>The document comprehensively displayed evidence to support many advantages of simulation-based learning.</p> <p>Please consider adding the following points to the guidance:</p> <ul style="list-style-type: none"> - Helps students for readiness in an emergency situation as it can repetitively simulate emergency scenarios and avoid making mistakes in real-world practice.



		<ul style="list-style-type: none"> - Helps students for complicated decision making through different types of simulation-based learning such as role play, case studies, and videos with complicated cases. This will improve students' confidence in real-world practice. <p>Examples on ways to achieve simulation-based learning will be very helpful.</p>
<p>Clinical placements <input type="checkbox"/></p> <p>Simulation-based learning <input type="checkbox"/></p> <p>Virtual care <input checked="" type="checkbox"/></p>	<p>A comprehensive list of key recommendations based on evidence. This is very helpful.</p> <p>Ensuring education and healthcare providers work collaboratively to design virtual care learning activities for students.</p>	<p>Maybe a table of Pros and Cons of different technologies</p> <p>Virtual care is a good practice model, not only for rural areas, but also for situations where face-to-face care is not possible. However, it doesn't fit in all health streams in real world practice.</p>

2. Are there any other evidence-based good practice statements that should be included in the guidance?

No additional statements

3. What information could the committee provide that would help National Scheme entities implement the guidance?

A table outlining the barriers, enablers, and possible solutions for each of the three categories will guide the end-users in understanding their constraints and systematically strengthening and assessing their unique situation. For example, strategies for integration of allied health placements on page 14, Appendix B, Tables 4 on page 20 – has concrete strategies and recommendations/suggestions to achieve goals from evidence. Program development teams, educators and clinical supervisors would find this helpful if recommendations are clearly outlined and summarized in handout.

Adopting implementation science (translating knowledge into action) in developing supporting resources will greatly facilitate implementation. For instance, a readiness checklist will help the end-users understand their current status and identify areas for improvement; examples of good practices and tools will upskill the end-users; and examples of how to identify opportunities to embed the three practices in already heavily loaded curriculums will give end-users confidence.



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4. Do you have any general comments or feedback about the guidance?
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The draft guidance is comprehensive and evidence-based. Further guidance on the practicality will ensure its successful implementation.
