

Public consultation response template – draft guidance on embedding good practice in clinical placements, simulation-based learning and virtual care in initial student health practitioner education

June 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Please provide any feedback on the draft guidance using this template, including your responses to all or some of the questions in the text boxes on the following pages.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 These submissions will not be published on the website or elsewhere.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

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.

Question A

Are you completing this submission on behalf of an organisation or as an individual?

Your answer:

Organisation

Name of organisation: Community Advisory Council – Ahpra

Contact email: cac@ahpra.gov.au

Question B

If you are completing this submission as an individual, are you:

Other: Community Advisory Council

Question C

Would you like your submission to be published?

Yes, publish my submission **with** my name/organisation name

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><i>[Insert good practice statement number and/or statement here]</i></p>	<p><i>[Insert your comments and/or suggestions here]</i></p>
<p>Clinical placements <input checked="" type="checkbox"/></p>	<p>1.experience variety in their placements, including....</p> <p>7.are provided with opportunities to consider the feedback they receive from clinical placement supervisors, reflect on their practice and improve their skills</p> <p>11.attend placement with organisations that can facilitate support for their personal needs...as much as possible</p>	<p>Such experience could further draw students out of their 'comfort zone' and increase confidence in better translating their theoretical knowledge practically and ultimately, in exercising professional skills. Also, diversity of experience gained in clinical placements could assist students in decision-making in seeking employment opportunities.</p> <p>It could be of benefit to include how the student can "proactively" seek such feedback. As well, how the student can be provided with professional advice on interpersonal development and relationship/communication building that could ultimately assist in professional confidence building and better completion of technical skills.</p> <p>The ability to self-reflect is a core component of cultural safety and so specifics in relation to this would be of use for the student.</p> <p>Our society is changing rapidly eg in terms of addressing cultural needs/differences, the current difficult societal environment which can increase the need for evaluation of student health and well-being and with government increase in diversity of migrant intake. Such change of circumstances then</p>

<p>Simulation-based learning ☒</p>	<p>3. they are demonstrated to result in greater student satisfaction in their learning</p>	<p>should be notably taken into account in placement decision making. It could be considered of significance to further develop a clearly outlined process to ensure student individual needs can be effectively and adequately addressed when deciding clinical placements.</p> <p>It could improve the outcome of such learning for student both in terms of professional and personal skills with highlighting how the supervision of student is of high quality and with such guidelines regularly reviewed. As well, such learning could have a positive impact both within and as an addition to the teaching methods that are standard and with the inclusion of student briefing and debriefing to help improve the learning experience.</p>
<p>Virtual care ☒</p>	<p>1. They are provided to student throughout their clinical education program where relevant</p>	<p>As this is largely used as part of rural and remote healthcare and increasingly mainstreamed, it could be worth ensuring the maintaining of a regular review of the broader nature of virtual care to drive impact in society's changing environment. Furthermore, in terms of rural and remote learning, it could be of benefit to clearly define how lack of personal interaction can be challenging with consideration given further to cultural diversity of students that can be impacting on the educational process.</p>

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

It could be worth promoting “Innovation in Clinical Placement Models” which could include team-based approaches and group supervision/paired placements. This could increase number of placements offering, add value to diversity of skills developed while on placement and increase both student and supervisor satisfaction.

In terms of simulation-based learning, effectively highlight/explain that this will provide educational rigor that will be aligned with student individual needs and be safe, good value, enhancing the student’s experience, streamlined, efficient and sustainable.

In terms of cultural safety, a simulation that demonstrates that clinically safe care can only exist when there is culturally safe care.

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

Regularly update relevant reference material for inclusion in decision making in moving forward - particularly with the current changing societal environment and need to ensure continuity of care and patient safety in an increasingly diverse society.

4. Do you have any general comments or feedback about the guidance?

With the increase of the ‘digital age’ utilize this resource to drive more positive impact particularly in terms of clinical placements with a reduction in availability and increase in demand. As well, with increasing expectations in diverse settings and reflecting future models of care and issues related to the duration type, cost, and quality of clinical care.

My only additional comments would be to consider on page 7, item 4, to add in that the in the demonstrate a willingness and ability to support students by – would include a dot point that they would ensure and/or foster a culturally safe environment.