

Clinical Placement National Quality Clinical Learning Environment Audit Tool

2018

CLINICAL PLACEMENT NATIONAL QUALITY CLINICAL LEARNING ENVIRONMENT AUDIT TOOL FOR HEALTH SERVICE PROVIDERS

This clinical placement wide audit tool is the designated NMBI National Clinical Learning Environment Audit Tool for use in all AHCPs where pre-registration nursing and midwifery students are placed during their training and may be completed by paper- based or by online/electronic methods. The NMBI will use this Audit Tool during all site visits. The Audit is undertaken in a collaborative manner between delegated persons in the HEIs and their associated AHCPs.

Standard 1

Criteria

- The placement is managed and organised in a manner compatible with the provision of a quality clinical learning experience for students
- The profile of each clinical learning environment is available to the student, and students are orientated into the clinical practice learning environment
- Written evidence outlining the systems and outcomes of quality monitoring and enhancements are in place

Standard 1: Students are orientated into the clinical practice learning environment

Indicators

given to the student:

1.	The clinical placement provides students with the opportunities to gain the required experiences to develop clinical competences as set out by NMBI (2016 a) $Y \square N \square$
2.	DON/DOM in delegated authority to NMPDU and the associated HEI Head of School
	collaboratively determines that systems for allocation of students are transparent and available $\rm Y \ \square \ N \ \square$
3.	DON/DOM in delegated authority to NMPDU and the associated HEI Head of School
	collaboratively determines that evidence of dedicated Student Allocation Liaison Officer
	(SALO/ALO) is in post including 0.5 WTE of an allocations liaison post for up to 50 nursing
	students Y \square N \square
4.	Auditors view evidence of posts in place Y \square N \square
5.	Prior to using new clinical placement sites, evidence of verification of a completed audit as
	endorsed by the HEI, was submitted to NMBI Y \square N \square
6.	Provide date of HEI verification Y \square N \square
7.	On first attending the clinical placement, each student is provided with a formal orientation
	to the site based on the programme/plan and the process is signed by the preceptor and
	counter-signed by the student Y \square N \square
8.	Auditors view on-site orientation programmes available to student nurses and midwives
	Y □ N □

1. The orientation programme/plan contains Information on the following elements which is

•	Reporting on and off duty, punctuality, sick leave, dress code and other releva matters	nt placement Y □ N □
•	Relevant clinical policies, procedures, protocols and guidelines	$Y \square N \square$
•	Organisation of care (e.g. method of client assessment and care planning)	$Y \square N \square$
•	Orientation to the physical layout of the unit/clinical department/service area	$Y \square N \square$
•	A copy of the learning objectives/outcomes specific to the clinical placem	ent area are
	available and are discussed with the student on orientation	$Y \square N \square$
Standa	ard 2	
Criteria	a	
•	Clinical placement experience is selected by the HEI in partnership with supporting the curriculum programme aims, in accordance with EU Directive a Standards and Requirements	
•	Quality, safe, professional, person-centred care underpins practice within learning environment	the clinical
•	The philosophy of nursing and midwifery held within the unit/clinical depart users areas are explicit and the model(s) of nursing and midwifery person utilises a systematic approach that frames the nursing or midwifery assessment planning, implementation and evaluation of care/service	centeredness
improv	ard 2: The HEI and its AHCP demonstrate a commitment to values- bavements toward evidenced-based care	ased, quality
Indicat	tors	
1.	The Memorandum of Understanding (MoU) is available	$Y \square N \square$
2.	The MoU provides detail on the system of academic engagement with clinical	
	support pre-registration practice-based learning	$Y \square N \square$
3.	Clinical placement documentation support the curriculum programme aims, i	
	with EU Directive and NMBI Standards and Requirements	$Y \square N \square$
4.	Clinical placement documentation reflect the breadth and diversity of the programmes	e educational Y□N□
5.	Evidence to demonstrate that there are registered trained preceptors to	facilitate the
	supervision and support of students' to achieve the learning outcomes/object	
	programmes	$Y \square N \square$
6.	Auditors view evidence of number of trained preceptors in clinical sites	Y □ N□
7.	Care provision reflects a mission statement that is displayed in a prominent pla organisation/service	ce within the Y \square N \square
8.	A philosophy of care consistent with the mission statement of the or	
	documented in writing and is displayed in a prominent location	Y □ N □
9.	Staff within clinical placement areas are aware of the philosophy of care	$Y \square N \square$

10.	The philosophy of care which may include statement of purpose, contract residents guide is discussed with each student during the clinical placement in a	
		Y 🗆 N 🗆
	A model of nursing is utilised in each clinical placement	Y 🗆 N 🗆
12.	A system of holistic care delivery in nursing and midwifery is evident in the placement	each clinical Y □ N □
13.	Auditors view evidence relating to philosophies of nursing and midwifery care mission statement, care plan and comment if necessary	and learning, Y□N□
1 /1	The student is accepted as a learner, encouraged to ask questions and actively	v contributes
17.	to patient care	Y \square N \square
15.	The clinical placement areas are provided with information on student placement time frame specified in a collaborative manner between AHCPs and associated by	
		$Y \square N \square$
16.	Students are given the opportunity to evaluate the clinical learning envidetermined by the AHCP)	ironment (as Y□ N □
17.	There is a system in place to monitor students' attendance in each clinical	al placement Y□N□
18.	Students record nursing or midwifery documentation, following which the precoreads and countersigns, and adds NMBI Pin number	
10	- '	
19.	RNs /RMs or students record practice that adheres to NMBI guidelines on Reco Practice (NMBI, 2015)	Y N
20.	Policies to support best practice in medication management, in accordance with	n NMBI (2016
	a) guidelines, are practiced and visible in each practice placement	\square N \square
21.	There is a formal structure in place between HEIs and AHCPs to address med	
	and evidence of educational and clinical audit	Y \square N \square
22.	Auditors view evidence of a minimum of 2 audits completed in the previous 6 m	onths
		$Y \;\square\; N \;\square$
22.	There is a formal structure in place between HEIs and AHCPs to address med	chanisms for,
	and evidence of clinical risk management programmes	$Y \square N \square$
23.	There is a formal structure in place between HEIs and AHCPs to address med and evidence of audit of nursing documentation	chanisms for,
		$Y \square N \square$
24.	There is a formal structure in place between HEIs and AHCPs to address med	chanisms for,
	and evidence of student support, supervision and assessment whilst in practice	settings
		Y □ N □
25.	There is a formal structure in place between HEIs and AHCPs to address policies	es to address
	complaints concerns of staff and students and are visible in the organisa placements	ition/ clinical Y□N□
26.	There is a formal structure in place between HEIs and AHCPs to address report	
	awareness and the application of research findings amongst clinical practitioner	
27.	Reports on the delivery of person-centred, holistic care of the person using he	
	are available	$Y \square N \square$

28. Organisational policies are in place to ensure students can raise concerns about the
perceived safety of patients and staff in the clinical areas Y \square N \square
29. There is a formal structure in place between HEIs and AHCPs to address any safety
concerns Y □ N □
30. There is a formal structure in place between HEIs and AHCPs to address any clinical risk
governance Y \square N \square 31. There is a formal structure in place between HEIs and AHCPs to ensure that robust
31. There is a formal structure in place between HEIs and AHCPs to ensure that robust processes for managing undergraduate health problems are in place Y \square N \square
Auditor should view evidence of a minimum of 2 audits completed in the previous 6 month in areas
22-31
32. Students are made aware of the importance of consent, privacy, dignity, confidentiality and
the Code of Professional Conduct and Ethics within all clinical placements Y \square N \square
33. Each clinical placement is compliant with the required health and safety regulations
$Y \square N \square$
34. Each clinical placement meets the required standard with regards to hygiene and infection
prevention and control Y \(\sum \) N \(\sum \)
35. Nursing and midwifery staff engage in clinical risk assessment and where appropriate use
risk assessment tools Y \square N \square
36. There is a formal structure in place between HEIs and AHCPs to ensure that mechanisms are explicit as to the role and function of members of the public and persons in receipt of
healthcare in the process of curriculum programme review and evaluation $Y \square N \square$
Auditor views evidence of a minimum of 2 audits completed in the previous 6 month in areas 32-36
Addition views evidence of a minimum of 2 addits completed in the previous o month in areas 32-30
Standard 3
Standard 3 Criteria
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This list is not exhaustive

Standard 4

Criteria

- The clinical placement provides a supportive and facilitative learning environment for students
- Each staff member engages in facilitating student learning through supervision, teaching and, where applicable, assessing
- RNs/RMs, Preceptors, CPCs and Link lecturers/Personal Tutor are qualified and prepared to support student learning throughout their clinical placements.

Standard 4: The practice learning environment supports student supervision

Indicators

1.	Each staff member is familiar with his/her respective role in facilitating student	t learning (e.g.
	supervising, precepting, teaching, assessing)	$Y \square N \square$
2.	Clearly written up-to-date learning outcomes/objectives, specific to the clinical pla	acement areas,
	are available and accessible to ensure optimal clinical placement experience	$Y \square N \square$
3.	A physically safe environment in which learning takes place is provided	$Y \square N \square$
4.	Staff familiar with the student support systems is in place at the HEI (e.g. link lec	turer, personal
	tutor, clinical allocations officer)	$Y \square N \square$
5.	Each student is provided with opportunities to obtain experiences across a	range of care
	activities, appropriate to his/her stage of programme Y \square N \square	
6.	Preceptorship is in place to support students in all specialist clinical placements Y	\square N \square
7.	Each student is assigned a preceptor and/or associate preceptor, who are RN	ls/RMs, at the
	commencement of the clinical placement Y \square I	N 🗆
8.	Preceptors/RNs or RMs who support students, have completed a teaching and as	sessing course
	approved by NMBI, and demonstrate, for example attendance certificates Y \square N \square	
9.	The Preceptor initial preparation is determined and supported by refresher course	es and support
	from NMPDU in relation to student supervision and competence assessment Y \square	N 🗆
10.	10. Auditors view evidence of Teaching and Assessing courses undertaken incl	uding dates of
	courses undertaken in the past 12 months Y \square	N 🗆
11.	The student has the opportunity to work alongside their preceptor or associate pro-	eceptor for the
	duration of the clinical placement or with a RN/RM in external small units, in th	e absence of a
	preceptor (NMBI 2016 a: 22,23,127) Y 🗆 N	
12.	Preceptor and student negotiate a plan of learning using the student's Competen	cy Assessment
	Tool for each clinical placement Y \square I	N 🗆
13.	The preceptor and student agree clearly written learning outcomes/objectives is	n each clinical
	nlacement Y 🗆 I	NΠ

14.	Clinical based learning is supported by adequate numbers of qualified and prepare supervised by the nurse or midwife practice development coordinator. A min one clinical placement coordinator to every 30 nursing students and 1:15 for midwine practice.	imum ratio of vifery students
	is in place with due regard to the geographical location and array of pra (Department of Health 2004:41)	ctice settings Y□N□
15.	View evidence of CPC ratio in place in organisation/clinical placement areas	$Y \square N \square$
16.	There is evidence that the CPC in conjunction with the preceptor/associate precepture students' learning outcomes/objectives for each clinical placement	otor facilitates Y □ N □
17.	CPC arrangements are in place to support students in all placements include placements	ding specialist Y□N
18.	The CNM/CMM is made aware if a student has not been assigned a preceptor a action is taken	nd immediate Y □ N □
19.	A named link lecturer/personal tutor from the associated HEI is identified to placement areas or all students	for all clinical Y□N□
20.	The role of the link lecturer/ personal tutor is known and understood by staff	$Y \square N \square$
21.	The link lecturer/personal tutor in the HEI notifies the Preceptors and CPCs of the	date and time
	for a visit related to a clinical assessment for individual students	$Y \square N \square$
22.	Staff and students are aware of the name and contact details of the link lecturer/ Y \square N \square	personal tutor
23.	Communication is transparent, written and agreed between the HEI and re	levant clinical
	placement staff and students	$Y \square N \square$
24.	The supernumerary status of the nursing or midwifery student in years 1-3 and in	pre-internship
	year 4 is explicit for preceptors and students	$Y \square N \square$
25.	Specified internship clinical placements provide experience of the 24 hour cycle	of the person
	accessing health services	Y □ N □
26.	Relevant clinical placement staff receives formal written feedback from t	he HEI link
	lecture/personal tutor regarding the student's learning	Y □ N □
Ple	ase provide any additional comments on preceptorship	
27.	There is evidence of clinical audit undertaken in clinical placements	Y 🗆 N 🗆
Ple	ase provide details of 2 clinical audits undertaken in the previous 6 months	

Standard 5

Criteria

- There is evidence of effective working relationships between the HEI, DON/DOM and the NMPD in AHCPs to ensure that competency is achieved and student assessment completed
- The NMPD and CPCs in AHCPs and Link Lecturer's/Personal Tutors in HEIs work in partnership when reviewing the process of clinical assessment for students

Standard 5: The clinical placement learning environment provides appropriate assessment opportunities for students

Indicators

	1.	Clinical-based assessment of learning and attainment of competence is based on the	5
		Competency Assessment Tool, for progressive achievement of proficiency Y \square N \square	
	2.	Relevant clinical staff are familiar with the Competency Assessment Tool used $$	
	3.	CPCs oversee the assessment process to ensure student learning Y \square N \square	
	4.	CNMs/CMMs work closely with Preceptors to enable the students to get a comprehensive	9
		and fair assessment Y \square N \square	
	5.	Student assessments are conducted in a timely manner? Y \square N \square	
Plea	ase (comment on student assessment	
	6.	Evidence is available that the assessment process for students is structured to include	;
		preliminary, intermediate and final interviews Y \square N \square	
	7.	The initial interview with students takes place during the first week in the clinical placemen	t
		Y □ N □	
	8.	The intermediate interview is completed approximately half-way through the clinical	ı
		practice placement, if clinical placement is greater than 3 weeks Y \square N \square	
	9.	Feedback is given to student to identify strengths and areas needing further development in	า
		each of the six domains of competence Y \square N \square	
	10.	Students have time and resources to address areas of competences that need attention and	t
		to review learning outcomes/objectives prior to final interview Y \square N \square	
	11.	Final interviews are completed by the preceptor or associate preceptor and necessary	y
		documentation completed before the students leaves the clinical placement $$	
	12.	Students receive appropriate support and constructive feedback in an ongoing consisten	t
		manner $Y \square N \square$	
	13.	Students and/or preceptors can access support during the assessment process, if needed	Y
		\square N \square	
	14.	Preceptors are aware of the process that must be undertaken if a student is not performing	g
		to the required level of competence Y \square N \square	
	15.	Action plans/Learning plans are drawn up by preceptors, CPCs and link lecturer/personal	ıl
		tutor if a student is not yet competent Y \square N \square	

16. The student uses the Competency Assessment Tool to demonstrate evidence of competences to the preceptor and CPC 17. Where learning opportunities occur under the supervision of other members of the multidisciplinary team, allied health, educational and social care professionals, such experiences are monitored by a RN/RM and the placement final assessment process allows for the involvement of a RN/RM. Such opportunities support learning and should not replace nursing/midwifery supervision Y□N□ Please provide any additional comments on assessments as required		
18. Mechanisms are In place between the HEI and AHCP to provide reports of internal and		
external subject quality reviews Y \square N \square 19. Auditors view samples of quality reviews for example quality care, metrics/student evaluations, patient satisfaction, HEI quality report (This list is not exhaustive) Y \square N \square		
Standard 6		
Criteria		
 Learning outcomes /opportunities and resources are available in each clinical placement to guide the student and Preceptor in identifying appropriate learning outcomes/objectives and opportunities 		
 Opportunities are available for the student to undertake reflective time and share learning experiences 		
Standard 6: Students are supported to achieve their learning outcomes/ objectives within the clinical learning environment		
Indicators		
1. Learning outcomes/objectives for each year are clearly written, up-to-date, reviewed annually jointly by the preceptor and link lecturer/personal tutor and are appropriate to the clinical placement Y \square N \square		
2. Auditors view samples of learning outcomes/ objectives		
3. Teaching-learning opportunities are normally based on the students' prescribed learning outcomes/objectives for each clinical placement Y \square N \square		
4. Learning outcomes/ objectives capture the specific learning opportunities available in each clinical placement Y \square N \square		
5. Learning outcomes/objectives reflect the learner's level of competence in each clinical placement Y \square N \square		
6. Students engage in supervised clinical practice appropriate to the learning outcomes/		
objectives for clinical placement and the year status of the student ${\sf Y} \ \square \ {\sf N} \ \square$		

7.	Auditors review details of the number of vacant posts relative to filled posts in clinical placement areas where students are placed Y \square N \square
8.	Reflective time of a minimum of 4 hours per week, if placement is greater than 3 weeks, is provided to students during supernumerary placements and the structures in place for its implementation during the internship is agreed collaboratively by the HEI and AHCP and is included in the MOU $Y \ \square \ N \ \square$
9.	Auditors review the reflective time process provided in the organisation
10.	Students are supported and supervised by preceptors/associate preceptors/RNs/RMs during the final placement of 36 weeks internship to consolidate the completed theoretical learning and to support the achievement of Domains of Competency on completion of the programme and registration $Y \ \square \ N \ \square$
11.	. Auditors view supports, supervision and reflective time provided for internship students in the organisation $Y \ \square \ N \ \square$
Standa	ard 7
Criteria	3
•	Learning outcomes /opportunities and resources are available in each clinical placement to guide the student and preceptor in identifying appropriate learning outcomes/objectives and opportunities
Standa	rd 7: Physical and educational resources support student learning within clinical practice
Indicat	ors
1.	There are resources appropriate to the needs of patients to support optimum student learning experiences Y \square N \square
2.	Documentation relating to the pre-registration nursing and midwifery NMBI programmes is readily available within each clinical placement Y \square N \square
3.	Students, preceptors and CPCs have access to internet facilities in practice /office Y \square N \square
4.	Resource room/tutorial room/quiet area are available within the clinical placement for students and relevant staff Y \square N \square
5.	Resource materials are relevant, up to date and specific, such as library/books/journals/articles are available for students and staff to use as a reference Y \square N \square
6.	Supports and services required by a student with a disability are provided according to individual need and legislation prevailing at the time $Y \square N \square$
7.	Current Data Protection legislation and guidelines are available and communicated to all
,.	staff $Y \square N \square$

- 8. Current Information Technology legislation and guidelines are available, visible and communicated to all staff Y \square N \square
- 9. Auditors view the resources available to students (e.g. Internet, Intranet, PPPGS, Library access)

References from Desk Top Review: Athlone Institute of Technology 2017; Dublin City University 2013; Dundalk Institute of Technology 2014; Galway Mayo Institute of Technology 2010; Tralee Institute of Technology 2016; University College Dublin 2016; St Angela's College, Sligo 2017; St Vincent's University Hospital, Dublin 2016; University College Cork 2014a,b; Waterford Institute of Technology 2017.