Clinical Placement Guidelines 2018
School of Nursing, Midwifery & Healthcare

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SECTION 1: INTRODUCTION

1.1 Clinical Learning Program

Clinical placement is an important component of your program of study, providing you with the opportunity to develop skills and integrate theoretical knowledge within nursing practice. Completion of the theoretical and clinical learning requirements of your program is essential to be eligible for registration with the Nursing and Midwifery Board of Australia (NMBA), Australian Health Practitioner Regulation Agency (AHPRA).

This information outlines the guidelines for clinical placement for the Bachelor of Nursing program. It is important that you familiarise yourself with this information, which should be read in conjunction with the Faculty and University handbooks. While it is expected that attendance at clinical placements will require you to reorganise some aspects of your personal life, it is anticipated that you will find this component of the program most rewarding as it provides you with a range of experiences and opportunities. Clinical placements occur throughout the calendar year including semester breaks, school and public holidays. Therefore, you are advised not to organise personal commitments until final clinical allocations for your particular clinical course have been published by the Clinical Office. Changes cannot be made once the placement has been allocated. Clinical placement dates are published at the beginning of each academic year.

Clinical placements and allocations are managed according to University and Health agency contractual agreements. You are NOT to contact or organise your own clinical placements with external health agencies.

Clinical placements are determined by processes and availability within regional, metropolitan Victoria and interstate agencies. As the University is situated in the Grampians, Southeast Melbourne and Gippsland regions, the majority of clinical placements occur throughout these regions. Students are encouraged to select placements in rural areas as well as metropolitan facilities as a variety of placements give you a well-rounded education. Clinical placements and venues are subject to change at times often due to issues that are not under the control of the university. It is an expectation that students are required to pay for the associated costs of clinical placement which include travel, parking and any associated accommodation costs related to clinical placement attendance. The Clinical Office will maintain a record of your clinical placement hours. Non-attendance at an allocated clinical placement could result in a fail grade for the course. The student is required to notify the clinical office for each day they do not attend placement. Supporting evidence, such as medical/health certificates for absences should be forwarded to the clinical office. Scholarships are available through Federation University to assist financially with clinical placements.

1.2 Clinical Placement Allocation Process

Allocation to a health care agency for clinical placement is determined by the objectives of your clinical course, and year level. The Clinical Office allocates appropriate placements that enable you to experience work-integrated learning and meet the objectives of the course. You will be emailed notification of your placement allocation via InPlace.
Following publication of allocations, you will have two (2) working weeks (10 days) to swap your allocation with another student should you wish to, provided that:

- Both students agree to the change.
- A Change of Allocation form is completed and signed by both students. This is available on the Moodle site of the clinical courses.
- The Clinical Office confirms the change as appropriate for each student’s clinical learning program through InPlace.

A request to change your allocation does not guarantee approval. If you have difficulties arranging a change of allocation, please contact the Clinical Office on your campus as early as possible to discuss options.

1.2.1 Clinical Placement Allocation Consideration

If you have circumstances that may affect your ability to participate in and or attend a clinical placement, you will need to complete an Application for Special Consideration stating your specific circumstances and attach supporting documentary evidence to your Application.

http://federation.edu.au/current-students/essential-info/administration/special-consideration/higher-education

Extraordinary circumstances include:

- Essential surgery (a medical certificate will be required)
- Medical conditions (a medical certificate will be required)
- Obligations to the armed forces or CFA or similar (documentary evidence required)
- Requirements of legal proceedings – supported with documentation
- Bereavement – supported by documentation

Clinical placement allocations cannot be split or delayed, completed part time, based upon individual shift requests, or sourced by individual students.

1.2.2 Rosters

Not all health agencies provide rosters prior to clinical placement commencing. Many agencies negotiate rosters on your first day of placement. Rosters that are available will be emailed to you using your Federation University email account. As changes to rosters often occur in the clinical environment, amended rosters will also be emailed to you. It is your responsibility to check your email regularly. You are expected to attend all rostered shifts including morning, afternoon, night duty, weekend shifts and public holidays. A clinical week is from Monday to Sunday for all year levels. First year students are not permitted to do night shifts. It is your responsibility to fulfil the requirements of the allocated clinical placement and to familiarise yourself with health agency policies.

First day details and any requirements such as additional forms or separate orientation days are advertised on the InPlace Site. Visit the InPlace Site to check for information prior to each clinical placement.

Whilst on placement, you may be able to negotiate shift changes. However, this is not encouraged as most facilities do not allow change once the roster has been completed. Note that changes in the roster need to occur in a timely manner and the health agency must approve the swap and be notified if any other changes occur.

The Clinical Office has no control over rosters and are unable to intervene on your behalf with a rostering issue. Students are responsible for their own negotiations with rosters.
1.2.3 Paid Employment During Clinical Placement

While we understand the pressures faced by students in relation to clinical placement, it is a compulsory component of your course and needs to take priority in your planning. We are unable to arrange clinical placements around individual work and family and pre-booked holiday commitments. The quality of learning whilst on placement will be greatly enhanced if you are able to organise yourself in advance to ensure full attendance. We encourage students to take advantage of subsidised accommodation offered by many health agencies. Working shift work and undertaking long commutes is an unsafe practice and is strongly discouraged. It is advisable not to undertake regular shifts in your own job whilst undertaking clinical placement.

FedUni offers an online registration tool ‘KickStart’ which students can use to apply for scholarships, bursaries and grants. Through KickStart, you may be eligible to receive financial assistance during your placement through a placement grant.

To determine your eligibility and instructions on how to apply for KickStart, please visit http://federation.edu.au/current-students/starting-at-feduni/scholarships or contact our Scholarships, Bursaries and Grants Office directly on (03) 5327 9340 / scholarships@federation.edu.au

1.2.4 Missed Days/Non-Completion of Required Clinical Placement Hours

The Australian Health Practitioner Regulation Agency (AHPRA) mandate the clinical hours required for registration as a Division 1 Registered Nurse. Currently students must complete a minimum of 800 hours clinical placement throughout the Bachelor of Nursing. You are required to complete all allocated clinical placements hours for each placement in order to gain your registration at the completion of the program. If you miss a day, you must be prepared to complete make up time. A clinical make up form must be completed and signed off on at placement and uploaded in to InPlace. Students are required to submit supporting documentation for all missed clinical time to the Clinical Office and the facility if requested. The process for notification for any missed days is outlined below. These steps must be followed.

<table>
<thead>
<tr>
<th>Day of missed placement</th>
<th>By end of placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact educator/ward</td>
<td>Contact Clinical Office by phone or email</td>
</tr>
<tr>
<td>Complete clinical make up form and upload in to InPlace</td>
<td>Submit supporting documents to Clinical Office</td>
</tr>
<tr>
<td>Await details about make up placement</td>
<td></td>
</tr>
</tbody>
</table>

1.2.5 Problems Arising During Clinical Placement

If you have a problem whilst on clinical placement, clarification about the situation should be sought from the person(s) responsible. If the problem is related to a clinical situation, you should consult your clinical educator and/or health agency staff immediately. The Faculty process for problem resolution involves the following steps:

If the problem is related to:

- The course, the Course Coordinator should be contacted.
- The clinical placement, the Clinical Coordinator should be contacted.
- The program, the BN Program Coordinator should be contacted.

The clinical office can be contacted during business hours Monday to Friday between 0900 and 1630. For urgent assistance after hours or on weekends (or if the Clinical Office phone isn’t answered during the week), the clinical coordinator for Ballarat can be contacted via mobile: 0428 172 866, Berwick clinical coordinator on 0436 350 209 and Gippsland on 0408 333 197. Alternatively, non-urgent inquiries can be made via email to the clinical office or the clinical coordinator.
SECTION 2: CLINICAL PLACEMENT REQUIREMENTS

2.1 Mandatory Documentation

Health agencies mandate that you provide the following documents at the commencement of your clinical placement:

a. Fit2Work Police Check (dated the same year that you are undertaking placement)
b. Working with Children clearance which is valid for 5 years
c. Immunisation Status clearance
d. Consent form
e. International Police Check (if applicable)

All of these forms are available on the InPlace site.

These documents must be original, current and legible. Students are expected to submit all mandatory documentation to the clinical office no later than 4 weeks before the allocated commencement date of placement. Failure to provide the mandatory documentation will mean that students will not be eligible to attend placement and a fail grade may be recorded.

Students will be withdrawn from clinical placement if they are unable to produce a current police check and other appropriate documentation when on placement. It is also advisable to take all documents to clinical placement and present them in a professional manner e.g. folder.

If you are not able to present the documents to the clinical office or to the health agency, you will not be permitted to attend placement. This will jeopardise your ability to complete your course and hinder your program progression and completion timeframes.

Inherent Requirements

Federation University Australia is committed to ensuring equality of access to all programs and courses and will provide reasonable adjustments to the learning environment to meet the needs of a diverse range of students. For example, students with a disability, and students with caring responsibilities.

However, Federation University acknowledges that there are some situations where reasonable adjustment is not possible. In such cases, Federation University will provide information on such restrictions to enable students to make an informed decision in relation to their program and course options in the form of inherent requirements.

Inherent requirements refer to the fundamental attributes, skills and abilities that you must be able to achieve in order to demonstrate the essential learning outcomes of the degree you are studying. For example, such restrictions MAY include but are not limited to the following:

- Inability to secure a current Working with Children Check precluding students being able to undertake mandatory placements in an Education or Health program;
- An inability to make reasonable adjustments in the education, clinical or workplace environment in relation to physical, psychological, cultural or sensory disabilities precluding students from being able to undertake mandatory placements in a Nursing program;
- Disclosures on Police checks that may preclude students from being able to undertake mandatory placements.
Federation University also notes that successful completion of a qualification does not necessarily guarantee registration in the associated profession. Students are advised to seek information on any restrictions that might apply to them in the applicable registration process prior to making decisions on a choice of program. For example, APHRA registration for nursing students, VIT registration for education students.


2.2 Student Responsibilities: Clinical Placement and Attendance

Clinical Attendance
You are required to complete all the clinical hours/days outlined in your course descriptor. Clinical educators will monitor your attendance and will communicate with the Clinical Office regarding absences. Following completion of a clinical placement, it is your responsibility to scan the original completed clinical appraisal tool and submit via your clinical course Moodle page. Uploading to InPlace is required for recording of hours for final registration with AHPRA. You should ensure this document has been signed by appropriate health agency staff.

Shifts
It is your responsibility to fulfil the requirements of the allocated clinical placement and to familiarise yourself with health agency policies. In some instances you may be rostered for either longer or shorter days. If so, this will be clearly specified. It is your responsibility to check your start and finish times.

Illness
If you become ill during the course of a shift, and have worked four or more hours, this may be counted as a full day at the discretion of the clinical educator. You will need to provide evidence of illness if any further time is missed.

Post-clinical debriefing
Debriefing is an opportunity to reflect in a constructive way on the positive and sometimes challenging issues or experiences you may have encountered during your day/week whilst on clinical placement. It is also an opportunity to support other students, ask questions and to prepare for the next day. Attendance at post clinical debriefings is compulsory. If you are having issues on placement or require further support, it is advisable to contact your clinical educator as soon as possible.

For additional support, the clinical coordinator carries a mobile phone 24 hours a day whenever students are on placement (Ballarat can be contacted via mobile: 0428 172 866, Berwick clinical coordinator on 0436350209 and Gippsland on 0408 333 197) and is always available to assist with debriefing.

Punctuality/lateness
You are expected to present punctually to clinical placement. If unable to attend or if you are running late you must notify the health agency immediately. Punctuality is part of professional practice and is integral to your clinical learning experience.
2.3 Uniforms and Professional Presentation

Whilst on placement, your personal presentation should be reflective of a student representing the Faculty of Health and the University. Professional appearance and behaviour is to be maintained at all times. The uniform is available at the FedUni shop on the Mt Helen Campus, Berwick and Gippsland Campuses. Your official uniform clearly identifies that you are a student of Federation University and must be worn to and from clinical placement unless otherwise directed. Improper attire may result in being asked to leave the venue and recorded as absent for that shift unless it is a designated “non-uniform” placement as specified by the clinical venue.

If you are attending clinical placements which stipulate ‘non–uniform’ – for example some mental health agencies – you may be requested to wear neat, clean professional clothes with closed- toe, leather upper shoes, as approved by the health agency. Inappropriate attire such as jeans and track suits will not be tolerated. In the event that your professional appearance is inappropriate, you will be sent home and this will be counted as a missed placement day.

It is recommended you purchase at least two uniforms. The uniform should be freshly laundered, ironed, stain free, in good repair and appropriately sized. Footwear must be closed- toe with non-slip sole and leather uppers. Hair must be clean. Long hair must be styled neatly and tied up off the collar so that it does not come into contact with either the client/patient, equipment or other items. Beards should be trimmed and tidy. Fingernails should be clean, short and free of nail polish. Ornamental jewellery is not to be worn, with the exception of a wedding ring, plain earrings, sleepers or small studs or a fob watch with a second hand. Any jewellery associated with body piercing should be removed or covered. Wrist watches and bracelets are not to be worn whilst on clinical placement. The facility may remove you from placement if the above information has not been adhered to.

Full uniforms must also be worn to all lab classes.

<table>
<thead>
<tr>
<th>FEMALE</th>
<th>MALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Navy/black trousers or knee length skirt</td>
<td>Navy/black trousers</td>
</tr>
<tr>
<td>Federation University nursing shirt</td>
<td>Federation University nursing shirt</td>
</tr>
<tr>
<td>Navy cardigan, and/or navy v-neck long sleeved jumper (these can only be worn to and from placement)</td>
<td>Navy cardigan or v-neck long sleeved jumper or cardigan (these can only be worn to and from placement)</td>
</tr>
<tr>
<td>Tights/Stockings - natural or navy/black colour</td>
<td>Socks - navy or black</td>
</tr>
<tr>
<td>Socks - Navy or black</td>
<td>Shoes - navy/black duty shoes with leather</td>
</tr>
<tr>
<td>Shoes - navy/black duty shoes with leather uppers</td>
<td></td>
</tr>
</tbody>
</table>

**NOTE**
Cardigans must only be worn to and from placements and must not be worn whilst on duty.
Sleeveless black/navy Federation vests can be whilst undertaking placement. Students are not to wear long-sleeved skivvies under their shirts (unless for religious reasons) and these must be rolled up whilst undertaking patient care.

Students must regularly launder their uniforms.
2.4 Professional Behaviour

As a student, your role is to participate fully in the clinical placement. Your clinical placement experience is designed to provide you with opportunities to develop and extend your knowledge, apply skills and appreciate values whilst participating, observing and performing as a student in a variety of professional nursing practice settings. The relationship between patient/client/resident/consumer and health care professional should always be safe, helpful and therapeutic and within the ethical and professional boundaries determined by the Nursing and Midwifery Board of Australia code of professional conduct for nurses. Whilst on clinical placement, you are expected to:

- Be punctual
- Dress professionally at all times
- Clearly wear student identification
- Introduce yourself as a student
- Maintain confidentiality of information
- Accept responsibility for all relevant aspects of nursing care within the scope of practice as determined by the course you are currently undertaking
- Behave in a respectful manner to all colleagues, supervisors, patients/residents, carers and their families
- Not use electronic communication devices, such as mobile phones, whilst rostered on clinical shifts – meal breaks excepted
- Acknowledge and respond respectfully to individual patient/client/resident/consumer needs
- Respond professionally to the requests of the health agency and its staff
- Present and complete each shift as rostered
- Comply and be familiar with health agency policies and procedures
- Notify the relevant person if you are unable to attend rostered shift/s

Whilst you are on placement you are accountable for your conduct to your clinical educator and health agency staff. The clinical coordinator and course coordinator are ultimately responsible for the management of clinical placement performance issues, in conjunction with the relevant clinical assessor/s and health agency staff. Behaviour in the clinical setting that jeopardises other people’s safety will result in immediate withdrawal from the clinical setting and automatic failure of that course. Acting outside your scope of practice will result in immediate failure of the clinical placement. Conduct that brings the discipline of nursing and/or the University into disrepute will result in immediate withdrawal from the clinical placement and automatic failure of that course. A disciplinary hearing may be held as set out in the University Handbook under Statute 6.1 Student Discipline.

In the event that you have been negligent, the University insurance policy does not protect you from either the health agency and/or the patient/client/resident/consumer taking legal action against you.
2.4.1 Alcohol / Drugs

It is expected that you will not present for clinical placement under the influence of alcohol and/or drugs. These substances have the potential to effect performance which may jeopardise your ability to perform safe patient care as well as complete your course and hinder your program progression and completion time frames. You will be removed from placement if it is believed that you are practicing under the influence, resulting in an automatic failure of the clinical placement aspect of the course. The Clinical Coordinator needs to be informed if there are any issues.

2.4.2 Confidentiality

You will have access to identifying information about the people for whom you provide care. Therefore you need to be familiar with, and understand, the relevant requirements of maintaining confidentiality and privacy of information. You are expected to maintain the privacy of information relating to the patients for whom you care.

Discussions and/or photographs relating to patients, clients, staff or agencies via electronic social networking sites including Facebook or in public spaces must not occur. This behaviour not only compromises the individual’s right to security and right to privacy, but litigation may result. Federation University’s Social Media Guidelines outlines the expectations of the University and its staff and students. All students should read this policy and understand that you will be held responsible should you breach these guidelines whilst on placement:

http://policy.federation.edu.au/community_engagement_and_development/media/socialameda/ch01.php

Breaches of confidentiality is an issue which is taken very seriously by the School and the University, and failure to observe appropriate professional conduct may result in instant termination of your clinical placement and a subsequent disciplinary hearing.

2.4.3 Telephone Calls While on Placement

Mobile phones must be turned off/silent/vibrate during each shift and must be placed in your bag. You are not permitted to carry a phone while in the clinical setting or working with patients. Please note that in some clinical settings you may be required to leave your mobile phone deposited in a secure area.

2.4.4 Responsibility as a Member of the Healthcare Team

Whilst on placement you are regarded as a member of a health care team. You are to follow the directions of your clinical educator/preceptor and health agency staff. If you are uncertain or unclear of a given direction, please seek clarification before commencing the activity. You may choose not to participate in a clinical activity if you do not feel adequately prepared or competent; however you should discuss this with your clinical educator. You must NEVER undertake a clinical skill that is outside your scope of practice. The NMBA Nursing Practice Decision Flowchart (http://www.nursingmidwiferyboard.gov.au/documents/default.aspx?record=WD10%2F1344&dbid=AP&chksum=otOhprlWlMnyXa8ZGfqUUA%3D%3D) has been attached to each Clinical Appraisal Tool as a means of guiding your decision-making about all clinical practice decisions, including the undertaking of clinical skills. All students are encouraged to undertake a review of this document prior to clinical placement and also throughout the clinical experience itself. (Appendix E)
2.4.5 Standard Infection Control Precautions

You are required to be familiar with, and abide by, the health agency’s written policies regarding the handling of bodily fluids, standard precautions and isolation. Standard infection control precautions are work practices required for the basic level of infection control. These are available from your clinical educator. They include good hygiene practices, particularly use of hand hygiene products, washing and drying hands before and after patient contact, the use of protective barriers (which may include gloves, gowns, plastic aprons, masks, eye shields or goggles), appropriate handling and disposal of sharps and other contaminated or infectious waste, and use of aseptic techniques.

2.4.6 Manual Handling

Before you commence your placement in a health agency, ensure that you have completed safe manual handling and workplace safety training (in the nursing skills labs) appropriate to your course and year of study. It is your responsibility to ensure that you are competent at using safe manual handling techniques and manual handling equipment to protect yourself and your colleagues from injury. You will be working under the supervision of a registered nurse/midwife. It is important that you always assess patients prior to moving them to identify the correct safe manual handling technique. This is required to move each client safely and prevent injuries to your colleagues and yourself.

2.4.7 Clinical Care Document

At all times, you must comply with health agency policies and standards for documentation of clinical care. All students are expected to complete documentation and handover of their clients with the supervision of their clinical educator or preceptor. All written notes are to be checked and counter signed by the clinical educator or preceptor.

2.4.8 Medication Administration

The following chart illustrates the routes of medication administration permitted by all year levels.

<table>
<thead>
<tr>
<th>Year level</th>
<th>Topical</th>
<th>Inhalation</th>
<th>Oral</th>
<th>Intra-muscular</th>
<th>Sub-cutaneous</th>
<th>Intra-venous</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td></td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>2nd</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>3rd</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
</tbody>
</table>

You can only perform these skills in accordance with the health agency policies and procedures, and under the supervision of a registered nurse or registered midwife. In accordance with the Nursing and Midwifery Board of Australia’s guidelines, supervision by an Endorsed Enrolled Nurse is not permitted. The protocol of the health care venue must be always followed with respect to checking, administering and documenting of medications.

Under no circumstances should you administer a medication without direct supervision of a registered nurse. If you cannot be supervised by a registered nurse, you must not administer any medications.
SECTION 3: CLINICAL PLACEMENT

3.1 Clinical Supervision Models

There are generally two models of clinical supervision: clinical educators (these can be employed by the hospital or the university) or clinical preceptors. Both have similar functions to provide support and supervision for students while on clinical placement. They are also responsible for assessing your progress and signing off your clinical books at the end of placement. Ultimately the final grade for your clinical placement is the responsibility of your course coordinator and the University.

**Clinical educators**

Responsibilities of a clinical educator include negotiating with hospital staff to ensure that you are allocated a workload that is commensurate with your progress and level of competence within the program, and enables you to meet relevant course objectives. The clinical educator may have a group of students to supervise at any one time and you will be allocated to work with another registered nurse or preceptor. The clinical educator will oversee your placement and may provide debriefings and work with you individually throughout the course of the day. Your clinical educator will liaise with the clinical staff in relation to your progress on clinical placement. They are also responsible for assessing your progress and signing off your clinical books at the end of placement.

**Preceptors**

A preceptor is a qualified experienced practitioner who is formally assigned to provide individual support to students. The role is very similar to that of the clinical educator except that preceptors generally work with one student per shift. Overall they may have a number of students they are supporting in a set clinical environment. They are also responsible for assessing your progress and signing off your clinical books at the end of each shift. In most instances you will have more than one preceptor on your placement. Health venues have various processes in place to ensure that students’ progress is monitored to ensure continuity of assessment and a final grade at the end of placement.

If you are not working at least an hour on every shift with an educator or preceptor, please contact the Clinical Coordinator as soon as practicable, via phone, text or email.

3.2 Modes/Types of Clinical Placement

**Block placement:**

Clinical placements occur throughout the calendar year including semester breaks, school and public holidays. Clinical placement dates are published at the beginning of each academic year. Block placement occurs in first, second and third year. The length of clinical blocks varies from year to year.

3.3 Clinical Placement

It is a requirement that you will bring items with you to clinical placement that will assist your transition into clinical practice. These items include the mandatory documentation outlined in Section 2. Additional items include your clinical appraisal tool, pens, watch with a second hand, clinical scissors, University ID, and notebook.

3.4 Communication with Clinical Education Staff

In some health agencies, your clinical education staff may have a variety of means of communicating with you, including pagers or mobile phones. You need to ask for relevant contact details. If you have consistent trouble finding your clinical assessor over more than one day, please contact the Clinical Office.
Please ensure you have selected your student email account in My Student Centre as your preferred email account as this is the only email address the university and placement facilities will send information to.

3.5 Assessment of Clinical Performance

You are required to meet the NMBA Registered Nurse Standards for Practice (2016) as described in the Clinical Appraisal Tool (Appendix A). Further detail concerning this assessment will be found in the clinical course descriptor for your course of study. The requirements to be successful in clinical placement advances each year so please make sure you are aware of the clinical requirements of your course prior to attending your placement. Your final summative assessment while on placement is to be conducted by a registered nurse only. This is a requirement of NMBA.

3.6 Clinical Appraisal Tool (Appendix A)

This can be accessed through your course Moodle page. It is your responsibility to print and take your booklet including the attendance time sheet to each clinical placement. You will be assessed at the midpoint and the end-points of each clinical placement in your program of study. During your clinical placement, it is your responsibility to ensure that you are given regular feedback about your performance, the two formal assessments are to be completed by a division one registered nurse and you are to complete the student sections in your clinical appraisal tool. The Clinical Appraisal Tool (Appendix A) is based on the NMBA Nursing Practice Decision Flowchart (Appendix E) (http://www.nursingmidwiferyboard.gov.au/documents/default.aspx?record=WD10%2F1344&dbid=AP&chksum=otOhprlWtMnyXa82GfQSUU%3D%3D) for informing decision-making and promoting a consistent approach to decisions about nursing practice. The use of the template tool assists in understanding and considering influencing factors in the decision-making process.

3.7 Responsibilities of Students at the Completion of Clinical Placement

It is your responsibility to scan and submit the original signed copy of your clinical appraisal tool. A Scanned PDF file should be uploaded onto your clinical course Moodle and InPlace site by the date detailed in the relevant course descriptor. You will not receive a result unless your clinical appraisal tool is uploaded. You are advised to keep an electronic copy of the original document for your own records as you may require this evidence for future graduate employment. Students are not required to submit documentation in support of clinical absence to course coordinators. Such documentation is to be handed directly to the Clinical Office.

3.8 Students Who Are Deemed Unfit or Unsafe

In many Federation University Australia contracts, it is the right of the health service to request a student be stood down or no longer attend their workplace. In such a case, the clinical coordinator must be informed. A student may be withdrawn from placement in the following circumstances:

- If they are not fit to practice, that is, unable to exercise appropriate duty of care to patients/clients, educators/supervisors, or peers due to mental or physical health conditions, or it is deemed that the student is at risk. The health service/agency and/or the clinical coordinator may, under such conditions, decide to withdraw a student.
- If they demonstrate clinically unsafe practice
- If they display unprofessional conduct or behaviour.

Refer to Appendix B for the guidelines for a clinical challenge contract for a student who fits the above criteria. Appendix C illustrates the clinical challenge contract. Attached is a flowchart outlining the process required by the health care agency and the University in the event that a student is identified as being unfit or unsafe.
Pregnant Students

Clinical Placement
Students cannot attend placement in the 6 weeks prior to their due date or 6 weeks after the birth date of their child for any course. Students require a medical certificate from their medical practitioner stating they are fit to work. The dates they are fit to work must be noted within the certificate to be eligible for placement in the 3rd trimester of pregnancy. A copy of this certificate must be presented to the clinical coordinator.

Students are to inform the Clinical Coordinator if they are pregnant prior to undertaking placement.

On Campus Laboratory Attendance
Students cannot attend lab practicals 6 weeks prior to their due date or 6 weeks after the birth date of their child for any course UNLESS they have a medical certificate from their medical practitioner stating they are fit to work. The dates they are fit to work must be noted within the certificate to be eligible for attendance. A copy of this certificate must be presented to the course coordinator as well as shown to the academic running the labs on the day if this is not the course coordinator.

All students planning to undertake lab classes under these circumstances must meet with the course coordinator and program coordinator prior to commencing the course to discuss the workload requirements and ensure undertaking the course is the right choice.

If you have any concerns or question this response further please contact the program coordinator for the relevant campus.
School of Nursing, Midwifery & Healthcare
Clinical Appraisal Tool (CAT)

Important Contact Information:

GIPPSLAND
Clinical Office: Cheryl Cooke (03) 5122 6629 (office hours) / c.cooke@federation.edu.au
Clinical Coordinator: Louise Allen (03) 51 22 8272 (office hours) / 0408 333 197 (all hours) / l.allen@federation.edu.au

MT HELEN
Clinical Office: Brenda Oostendorp (03) 5327 9635 (office hours) / b.oostendorp@federation.edu.au
Clinical Coordinator: Alicia Perkins (03) 5362 2631 (office hours) / 0428 172 866 (all hours) / a.perkins@federation.edu.au

BERWICK
Clinical Office: Anna Panayiotou (03) 5122 6126 (office hours) / anna.panayiotou@federation.edu.au
Clinical Coordinator: Ann-Marie Brown (03) 5122 6890 (office hours) / 0436350209 (all hours) / ann-marie.brown@federation.edu.au

Instructions:

• This Clinical Appraisal Tool (CAT) is an assessment tool based on the observations undertaken by the clinical facilitator or preceptor during the student’s placement. The Nursing and Midwifery Board of Australia (NMBA) - national Registered Nurse standards for practice (June 2016) are used to frame the clinical learning experience and assess the student according to their level of study and the nature of the clinical placement.

• The clinical facilitator or preceptor is required to make an assessment of whether or not the standard has been demonstrated, and record it on this form. Students are required to record their own clinical learning objectives on the first page. They can then evaluate their own progress against the standards and their individual objectives.

• Students are assessed using five performance standards adapted from the Bondy Scale (1983) [see below], to provide a formative (interim) and final (Summative) assessment applicable to the student’s level of knowledge, skill performance, professional behaviour and communication.

• If at any time during clinical experience a Clinical Educator/Preceptor considers a student to be at Dependent (D) Level in accordance with the Bondy (1983) scale, the campus specific Clinical Coordinator must be notified and will assist in placing the student on a ‘Clinical Challenge Contract’. The purpose of this contract is to assist the student in gaining competence, and/or depending on the circumstance, the student could be withdrawn from the clinical area.

• In order for a student to pass the clinical placement they need a minimal rating of Supervised (s) for standard 2 and ‘assisted’ in all standards with the exception of NURBN 3023 and NURBN3021 where students must gain an overall rating of supervised or above.

Criteria for Rating:

<table>
<thead>
<tr>
<th>SCALE</th>
<th>PROFESSIONAL STANDARD</th>
<th>QUALITY OF PERFORMANCE</th>
<th>ASSISTANCE REQUIRED</th>
</tr>
</thead>
<tbody>
<tr>
<td>INDEPENDENT (I)</td>
<td>Safe; accurate; achieves the intended purpose each time; performs in an appropriate manner each time</td>
<td>Proficient; coordinated; confident; occasional expenditure of excess energy; performs within an expedient time period</td>
<td>Without supporting cues</td>
</tr>
<tr>
<td>SUPERVISED (S)</td>
<td>Safe; accurate; achieves the intended purpose each time; performs in an appropriate manner each time</td>
<td>Efficient; coordinated; confident; occasional expenditure of excess energy; performs within a reasonable time period</td>
<td>Occasional supportive cues (e.g. comments such as ‘that’s right’, ‘keep going’ are supportive cues)</td>
</tr>
<tr>
<td>ASSISTED (A)</td>
<td>Safe; accurate; achieves the intended purpose most of the time; performs in an appropriate manner most of the time</td>
<td>Skilful in parts of the behaviour; inefficient and un-coordinated; expends excess energy; performs within a delayed time period</td>
<td>Frequent verbal and occasional physical directive cues (in an attempt to correct activity or indicate what is required next) in addition to supportive ones.</td>
</tr>
<tr>
<td>MARGINAL (M)</td>
<td>Safe, but not alone, performs at risk; not always accurate; Occasionally achieves the intended purpose; Occasionally performs in an appropriate manner</td>
<td>Unskilled; inefficient, considerable expenditure of excess energy; performs within a prolonged time period</td>
<td>Continuous verbal directive, and frequent physical directive cues</td>
</tr>
<tr>
<td>DEPENDENT (D)</td>
<td>Unsafe; unable to demonstrate intended behaviour</td>
<td>Unable to demonstrate procedure or behaviour; lacks confidence; lacks coordination, lacks efficiency</td>
<td>The cues are so directive and continuous that it is as if the supervisor is performing the behaviour or skill</td>
</tr>
</tbody>
</table>

CAT TOOL - Page 1 of 13
## Interim Clinical Appraisal Tool (CAT)

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Student Number:</th>
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<tbody>
<tr>
<td>Campus of study: (Circle)</td>
<td>Ballarat Berwick Gippsland</td>
</tr>
<tr>
<td>Year of Program: (Circle)</td>
<td>1 2 3</td>
</tr>
<tr>
<td>Clinical Venue and Ward/ Unit:</td>
<td></td>
</tr>
<tr>
<td>Course Code: (Circle)</td>
<td>NURBN1006 NURBN2011 NURBN2014 NURBN2015 NURBN3023 NURBN3021</td>
</tr>
<tr>
<td>Preceptor name and signature:</td>
<td></td>
</tr>
</tbody>
</table>

### Student Learning Objectives: *(Must be completed by the student prior to and relative to the specific placement)*

#### Standard 1: Thinks Critically and analyses nursing practice

Relates to the use of a variety of thinking strategies and the best available evidence in making decisions and providing safe, quality nursing practice within person centred and evidence-based frameworks

<table>
<thead>
<tr>
<th></th>
<th>Student Self-appraisal</th>
<th>Clinical Assessor Appraisal</th>
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<tbody>
<tr>
<td></td>
<td>D M A S I</td>
<td>D M A S I</td>
</tr>
<tr>
<td>Accesses, analyses, and uses the best available evidence, that includes research findings, for safe, quality practice</td>
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<tr>
<td>Compiles with legislation, regulations, policies, guidelines and other standards or requirements relevant to the context of practice when making decisions</td>
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</table>

**Clinical facilitator/preceptor comments/examples of practice:**

#### Standard 2: Engages in therapeutic and professional relationships

Relates to practice which is based on purposefully engaging in effective therapeutic and professional relationships. This includes collegial generosity in the context of mutual trust and respect in professional relationships

<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td></td>
<td>D M A S I</td>
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</tr>
<tr>
<td>Demonstrates professional conduct at all times and when necessary reports notifiable conduct of health professionals, health workers and others</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establishes, sustains and concludes relationships in a way that differentiates the boundaries between professional and personal relationships including personal professional conduct</td>
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</tbody>
</table>
Clinical facilitator/preceptor comments/examples of practice:

<table>
<thead>
<tr>
<th>Standard 3: Maintains the capability for practice</th>
<th>Student Self-appraisal</th>
<th>Clinical Assessor Appraisal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relates to being responsible and accountable for ensuring they are safe, and have the capability for practice. This includes ongoing self-management and responding when there is concern about other health professionals' capability for practice. RNs are responsible for their professional development and contribute to the development of others. They are also responsible for providing information and education to enable people to make decisions and take action in relation to their health.</td>
<td>D M A S I</td>
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<tr>
<td>Considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice</td>
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<td>Accepts accountability for decisions, actions, behaviours and responsibilities inherent in their role, and for the actions of others to whom they have delegated responsibilities</td>
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<tr>
<td>Identifies and promotes education to improve and influence better health outcomes for people</td>
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<td>Seeks and responds to practice review and feedback</td>
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Clinical facilitator/preceptor comments/examples of practice:

<table>
<thead>
<tr>
<th>Standard 4: Comprehensively conducts assessments</th>
<th>Student Self-appraisal</th>
<th>Clinical Assessor Appraisal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relates to accurately conducting comprehensive and systematic assessments. Nurses analyse information and data, and communicate outcomes as the basis for their practice.</td>
<td>D M A S I</td>
<td>D M A S I</td>
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<tr>
<td>Conducts assessments that are holistic as well as culturally appropriate</td>
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<tr>
<td>Uses a range of assessment techniques to systematically collect relevant and accurate information and data to inform practice</td>
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</table>

Clinical facilitator/preceptor comments/examples of practice:
### Standard 5: Develops a plan for nursing practice

Relates to being responsible for the planning and communication of nursing practice. Agreed plans are developed in partnership. They are based on the RNs appraisal of comprehensive, relevant information, and evidence that is documented and communicated.

Collaboratively constructs nursing practice plans until contingencies, options priorities, goals, actions, outcomes and timeframes are agreed with the relevant persons

Documents, evaluates and modifies plans accordingly to facilitate the agreed outcomes

**Clinical facilitator/preceptor comments/examples of practice:**

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### Standard 6: Provides safe, appropriate and responsive quality nursing practice

Relates to the provision and delegation of quality and ethical goal-directed actions. These are based on comprehensive and systematic assessment, and the best available evidence to achieve planned and agreed outcomes.

Provides comprehensive safe quality practice to achieve agreed goals and outcomes that are responsive to the nursing needs of people

Practices within their scope of practice

**Clinical facilitator/preceptor comments/examples of practice:**

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### Standard 7: Evaluates outcomes to inform nursing practice

Relates to responsibility for the evaluation of practice based on agreed priorities, goals, plans and outcomes and revises practice accordingly.

Evaluates and monitors progress towards the extended goals and outcomes

Determines, documents and communicates further priorities, goals and outcomes with the relevant persons

**Clinical facilitator/preceptor comments/examples of practice:**

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### FINAL CLINICAL APPRAISAL TOOL (CAT)

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Student Learning Objectives: (Must be completed by the student prior to and relative to the specific placement)
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- Accesses, analyses, and uses the best available evidence, that includes research findings, for safe, quality practice.
- Complies with legislation, regulations, policies, guidelines and other standards or requirements relevant to the context of practice when making decisions.

Clinical facilitator/preceptor comments/examples of practice:

### Standard 2: Engages in therapeutic and professional relationships

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- Demonstrates professional conduct at all times and when necessary reports notifiable conduct of health professionals, health workers and others.
- Establishes, sustains and concludes relationships in a way that differentiates the boundaries between professional and personal relationships including personal professional conduct.

Clinical facilitator/preceptor comments/examples of practice:

### Standard 3: Maintains the capability for practice

Relates to being responsible and accountable for ensuring they are safe, and have the capability for practice. This includes ongoing self-management and responding when there is concern about other health professionals’ capability for practice. RNs are responsible for their professional development and contribute to the development of others. They are also responsible for providing information and education to enable people to make decisions and take action in relation to their health.

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- Considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice.
- Accepts accountability for decisions, actions, behaviours and responsibilities inherent in their role, and for the actions of others to whom they have delegated responsibilities.
- Identifies and promotes education to improve and influence better health outcomes for people.
- Seeks and responds to practice review and feedback.
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Clinical facilitator/preceptor comments/examples of practice:

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<td>Documents, evaluates and modifies plans accordingly to facilitate the agreed outcomes</td>
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Clinical facilitator/preceptor comments/examples of practice:

<table>
<thead>
<tr>
<th>Standard 6: Provides safe, appropriate and responsive quality nursing practice</th>
<th>Student Self-appraisal</th>
<th>Clinical Assessor Appraisal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provides comprehensive safe quality practice to achieve agreed goals and outcomes that are responsive to the nursing needs of people</td>
<td>D M A S I</td>
<td>D M A S I</td>
</tr>
<tr>
<td>Practices within their scope of practice</td>
<td></td>
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Clinical facilitator/preceptor comments/examples of practice:

**Standard 7: Evaluates outcomes to inform nursing practice**
Relates to responsibility for the evaluation of practice based on agreed priorities, goals, plans and outcomes and revises practice accordingly.

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Evaluates and monitors progress towards the extended goals and outcomes
Determines, documents and communicates further priorities, goals and outcomes with the relevant persons

Clinical facilitator/preceptor comments/examples of practice:

**Additional Clinical facilitator/ Preceptor comments:**

Preceptor name: Preceptor Signature:

Student comments:

Student name: Student signature:
Clinical Placement Attendance Record

Student Name: ________________________ Student No: __________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Start time</th>
<th>Finish time</th>
<th>Hours attended</th>
<th>Preceptor name and signature</th>
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**Week 1**

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<tr>
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**Week 2**

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**Week 3**

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**Week 4**

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<th>Date</th>
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<th>Finish time</th>
<th>Hours attended</th>
<th>Preceptor name and signature</th>
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**Week 5**

<table>
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<tr>
<th>Date</th>
<th>Start time</th>
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</tbody>
</table>

**Total hours completed**

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SCHOOL OF NURSING, MIDWIFERY & HEALTHCARE

Appendix A

CRICOS Provider No. 00103D
First Year Clinical Skills

Semester 1
- Infection control principles and hand hygiene
- Bed making – occupied and unoccupied & assessment of the clinical environment, Hospital waste management.
- Documentation & clinical handover- written (documentation template) & verbal – Introduction, Situation, Background, Assessment, Recommendation (ISBAR).
- The Nursing Process – History taking/Health interview
- Physical Assessment Techniques – History, Inspection, Palpation, Percussion & Auscultation (HIPPA).
- Primary Assessment - Danger, Response, Airway, Breathing, Circulation & Disability (DRABC).
- Vital sign measurements (TPR, SaO2, BP), Level of consciousness – Alert, Respond to Voice, Responds to Pain, Unconscious (AVPU), use and documentation of clinical findings on the Adult Deterioration Detection System (ADDS) chart.
- Basic Life Support theory and practical skills introduction based on Danger, Response, Airway, Breathing, Circulation (DRABC).
- Nutritional Assessment. Assisting patients/residents with nutrition. Nutritional requirements across the lifespan. Anthropometric measurements; height, weight, body mass-index (BMI). Fluid Balance Charts (FBC) documentation and practical application.
- Assisting with hygiene needs and activities of daily living for the dependent patient. Instruction on; Bed sponge technique; showering, perineal hygiene, mouth, eyes & skin care needs.
- Multi skill lab incorporating Week 1-11 skills to enable practice, revision and consolidate the learning of skills from the semester period.

Semester 2
- Introduction to safe patient handling techniques, manual handling & positioning of patients (use of slide sheets, patient hoists & mobility aids), assisting with mobility & range of movement. Falls Risk Assessment.
- Wound management – aseptic non-touch technique (ANTT) – simple wound dressings, pressure sore risk assessment screening – Braden scale.
- Neurological Assessment - Glasgow Coma Scale (GCS) & Blood Glucose Level (BGL) Measurement.
- Cardiovascular Assessment – assessment using; using; inspection, palpation, percussion and auscultation (IPPA). Method and basic lead for cardiac monitoring.
- Urine Assessment; urinalysis – full ward test (FWT), Midstream specimen of urine (MSU), Catheter specimen urine (CSU). Indwelling catheter (IDC) care.
- Preparing the deceased body – end-of-life care principles.
- Correct documentation and the use of drug charts. The five rights for drug administration. Procedure for oral, topical & drop medication administration.
- Achievement of learning outcomes and graduate capabilities.
Second Year Clinical Skills

Semester 1

- Professional handover and application of communication principles using -Introduction, Situation, Background, Assessment, Recommendation (ISBAR).
- Identification of common clinical indicators and method for instigating a Medical Emergency Team (MET) call, clinical documentation and early patient management strategies.
- Performing an advanced cardiovascular assessment. Nursing management of chest pain. Performing a 12 lead ECG and interpretation of basic cardiac rhythms.
- Preparing, calculating and performing - intramuscular & subcutaneous injections
- Preparation, calculating and administration of intravenous antibiotics.
- Preparing, calculating and administration of intravenous fluids.
- Performing an advanced respiratory assessment and basic chest x-ray interpretation.
- Patient application and use of various oxygen delivery devices based on flow and % of oxygen delivery.
- Performing basic airway clearance suction via yankeur and catheter suction.
- Managing fluid balance charts and understanding fluid summaries (significance of input/output).
- Performing a neurological assessment
- Performing a neurovascular assessment
- Care of the person with a musculoskeletal immobilisation devices (Plaster of Paris, Internal and External Fixation & Traction).
- Insertion and care of the person with a Nasogastric Tube and Percutaneous Endoscopic Gastronomy (PEG) tube inclusive of administration of nutrition and medications.
- Nursing colostomy care for patients.

Semester 2

- Care of the surgical patient including removal of sutures, surgical staples and surgical drain tubes. Application of the aseptic non-touch technique (ANTT) and complex dressings. Use of sterile gloves.
- Management of diabetic emergencies (hyperglycaemia and hypoglycaemia) and insulin infusions.
- Performing venepuncture.
- Insertion of an indwelling urinary catheter (IDC) for both male & female patients.
- Care of the person requiring continuous bladder washout.
- Performing a bladder scan.
- Introduction to central venous access devices management (central lines, PICCs) – accessing, administration of medications, fluids, drawing of blood and dressing changes.
- Cytotoxic, standard contact precautions.
- Administration and care of the person with a blood transfusion.
- Mental health status examination & risk assessment
- Preparation of person-centred mental health recovery plan
- Achievement of learning outcomes and graduate capabilities.
Third Year Clinical Skills


- Equipment and patient preparation for IV cannulation. IV medication administration for patients on continuous infusions, reconstitution of antibiotic therapy. Care of patients on Patient Controlled Analgesic (PCA) infusions. Care of patients on Narcotic Infusions. Epidural assessment and patient care principles, methods of bolus medication administration, documentation.

- Basic Electrocardiograph (ECG) rhythm interpretation and application to more complex clinical scenarios.

- Spinal immobilisation care and patient management strategies (application of hard and soft collars, log rolling technique).

- Introduction to haemodynamic monitoring- arterial (ART) lines and central venous catheter (CVC) lines. Care of, set up and readings, dressing changes for CVC/Peripherally Inserted Central Catheter (PICC). Medication administration techniques for a CVC. Introduction to total parenteral nutrition (TPN) therapy and process for administration including line and bag changes.

- Health assessment, planning person-centred nursing care, implementing and evaluating professional nursing care, appropriate documentation and follow-up. Managing care, supervising and delegating nursing care. Achievement of learning outcomes and graduate capabilities. (see the table below)

*Third year clinical practicum involves consolidation of all skills taught throughout the nursing program and practical application of critical thinking and assessment processes based on the NMBA RN Standards for Practice (2016).*
Nursing Graduate Attributes / Capabilities

The Bachelor of Nursing is a graduate capabilities outcomes-based curriculum, including Federation University Australia and BN Registered Nursing Graduate Capabilities/Attributes and the NMBA Registered Nurse Standards for Practice (2016).

<table>
<thead>
<tr>
<th>Federation University Graduate Attributes</th>
<th>BN Registered Nurse Graduate Capabilities</th>
<th>Low Focus</th>
<th>Medium Focus</th>
<th>High Focus</th>
<th>Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible, ethical, engaged citizens</td>
<td>1. Professional and ethical decision maker</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Social/cultural perspectives</td>
<td>2. Politically astute, situational leader and citizen</td>
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<tr>
<td>Local/national/international communities</td>
<td>3. Socially and culturally aware agent for change</td>
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<tr>
<td>Critical, creative and enquiring learners</td>
<td>4. Critical, reflective thinker adept in clinical reasoning</td>
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<tr>
<td>Problem solver</td>
<td>5. Creative problem solver</td>
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<tr>
<td>Ongoing learning</td>
<td>6. Life-long researcher</td>
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<tr>
<td>Capable, flexible and work ready</td>
<td>7. Skilled therapeutic Communicator</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Communication skills</td>
<td>8. Capable Inter-Disciplinary Healthcare Team Member</td>
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</tr>
<tr>
<td>Independent &amp; collaborative worker</td>
<td></td>
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</tr>
<tr>
<td>Knowledge, skills and competence</td>
<td>9. Competent, caring, safe and professional Nurse</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Competent, safe, quality care. Apply</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>knowledge &amp; skills into new contexts</td>
<td></td>
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</tr>
</tbody>
</table>
GUIDELINES FOR A CLINICAL CHALLENGE CONTRACT

Introduction

The Clinical Challenge Contract has been prepared for use with students studying nursing, based on the NMBA Registered Nurse Standards for Practice (2016). When the clinical educator becomes aware that there is a problem with an individual student, the clinical educator must contact the clinical coordinator in the School of Nursing, Midwifery and Healthcare. Ideally this should occur by the end of the student's first week of placement or as soon as an issue has been identified. A Clinical Challenge Contract is to be implemented after consultation with the University clinical coordinator and after all steps of the "Clinical Placement Flowchart" have been followed (see page 33 of Clinical Placement Guidelines document).

A Clinical Challenge Contract should be viewed by students as an opportunity for additional learning. They are not personal, nor is it harassment or bullying. Once a contract has been completed, the contract ceases to play a part in future clinical placements. However, it must be understood that a new Clinical Challenge Contract can be initiated should concerns again be raised about the professional conduct or clinical performance of the student, in the same or future placements.

Contacts

The clinical coordinator for each campus of Federation University is listed below:

<table>
<thead>
<tr>
<th>BALLARAT CAMPUS</th>
<th>GIPPSLAND CAMPUS</th>
<th>BERWICK CAMPUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alicia Perkins</td>
<td>Louise Allen</td>
<td>Ann-Marie Brown</td>
</tr>
<tr>
<td>(03) 5362 2631 (Office Hours)</td>
<td>(03) 5122 8272 (Office Hours)</td>
<td>(03) 5122 6890 (Office Hours)</td>
</tr>
<tr>
<td>0428 172 866 (All Hours)</td>
<td>0408 333 197 (All Hours)</td>
<td>0436 350 209</td>
</tr>
<tr>
<td><a href="mailto:a.perkins@federation.edu.au">a.perkins@federation.edu.au</a></td>
<td><a href="mailto:l.allen@federation.edu.au">l.allen@federation.edu.au</a></td>
<td><a href="mailto:ann-marie.brown@federation.edu.au">ann-marie.brown@federation.edu.au</a></td>
</tr>
</tbody>
</table>

Setting Learning Objectives

The following guidelines are designed to direct the clinical educator and student through the process of setting learning objectives for the educational management of students who may be unsafe, not meeting their clinical objectives, or who in some way are at risk of failing their clinical placement experience. 

After consultation with the clinical coordinator, the clinical educator must then discuss their documented concerns with the student in a confidential meeting. A Clinical Challenge Contract will then be devised with the student and will be completed within a specified and reasonable time frame.

Examples of clinical challenge objectives are presented on the next page.
<table>
<thead>
<tr>
<th>Issue identified</th>
<th>Learning objectives</th>
<th>Strategies implemented to assist in meeting learning objectives</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inability to demonstrate safe medication knowledge and correct procedure for administration of medication.</td>
<td>Student will be able to demonstrate 6 rights of medication administration for all his patients and discuss common medications found in this ward, including class, action and nursing considerations in administration of these medications on each shift for three days.</td>
<td>Student will be encouraged to inform educator of the 6 rights of medication administration prior to undertaking the medication round for the patient. Student encouraged to review allocated patients drug charts on commencement of shift and clarify if unsure of any medications.</td>
<td>Student successfully demonstrated safety in administration of medications and referred to the MIMS when unsure of a particular medication.</td>
</tr>
<tr>
<td>Student unable to perform basic accurate respiratory assessment on allocated patient</td>
<td>Student will be able to conduct a respiratory assessment in a systematic manner, demonstrating rationales for each step and discussing and documenting findings once each shift for one week.</td>
<td>Student will be referred to lecture notes for performing a respiratory assessment.</td>
<td>Student was unable to demonstrate a comprehensive respiratory assessment and required regular prompting to complete task.</td>
</tr>
<tr>
<td>Despite being a second year, second semester student, unable to take on the care of two patients without excessive prompting</td>
<td>Student will undertake care for two allocated patients for the duration of their next shift under the supervision of an RN.</td>
<td>Student encouraged to complete shift planner for the allocated patients. Student encouraged to seek assistance from RN when required. Student encouraged to discuss care with the RN.</td>
<td>Student showed an improvement in ability to prioritise patient care with the use of the shift planner. Student sought assistance from the RN to ensure timely delivery of care. Student required minimal prompting to complete care.</td>
</tr>
<tr>
<td>Inability to build therapeutic relationships with patients due to poor communication skills.</td>
<td>Student to communicate effectively with patients and provide explanations to patients regarding their care for the next two shifts. Student will initiate conversations with all patients and any of their visitors for the next two shifts.</td>
<td>Student encouraged to speak in a louder voice and pronounce words clearly. Student encouraged to introduce herself to patient and make small talk to build rapport.</td>
<td>Student showed no improvement in this area and continues to avoid communicating with patients, and does not introduce herself to patients in her care.</td>
</tr>
</tbody>
</table>
CLINICAL PLACEMENT FLOWCHART FOR STUDENTS WHO ARE IDENTIFIED AS UNFIT OR UNSAFE

Unsafe practice/misconduct

Clinical educator identifies concerns to student

University clinical coordinator is informed of incident and recommendations are made to clinical educator. If applicable: Hospital Incident report is completed and a copy is forwarded to the University.

Depending on the incident: Is the student being removed from placement?

YES

Student withdrawn from clinical placement and referred to program coordinator to meet and discuss the behaviour of concern.

NO

Discussion and outcome documented and recorded in student file.

Student receives a fail grade for clinical placement and case discussed with faculty to determine if student is given a supplementary placement.

Unsatisfactory progress/practice

Clinical educator identifies concerns to student

Clinical educator discusses concerns with University clinical coordinator, with suggested strategies to assist student to meet learning objectives in a limited timeframe.

Did strategies implemented improve student's ability?

NO

Written report of situation sent to University clinical coordinator for filing in student record

YES

REFER TO CLINICAL CHALLENGE FLOWCHART AND COMMENCE CLINICAL CHALLENGE CONTRACT

Student continues with placement, with clinical educator completing a final clinical appraisal on completion of placement.
Student Role in the Clinical Challenge Contract Process

The student is required to sign and date the Clinical Challenge Contract prior to commencement and to demonstrate their understanding and agreement to the implementation of the contract with the clinical educator. The objectives of the contract are to be shared with the student’s preceptor if necessary. The student and educator are to keep a copy of the contract and a copy is also provided to the clinical coordinator. The student will then be allocated an appropriate patient load (dependent upon the acuity of the patients and year level of student) to achieve the objectives and learning deficits of the clinical challenge within a specified time frame.

During the Clinical Challenge, the student is expected to demonstrate knowledge of their patients, including relevant nursing interventions, clinical diagnosis, diagnostic procedures and pharmacology management. The student is expected to be able to interpret the significance of relevant pathology, vital signs and other tests and investigations relevant to their scope of practice and in doing so, relate theory to practice. The student is expected to demonstrate prioritisation of care and display management of their time throughout the challenge. At all times, the student is to be engaged and monitored during this process and every opportunity provided to the student to engage with any aspect of the agreed clinical challenge.

If the student continues to demonstrate inability to meet the specified learning objectives in the Clinical Challenge Contract, the clinical educator must notify the clinical coordinator ASAP for further discussion and action.
## CLINICAL CHALLENGE CONTRACT

<table>
<thead>
<tr>
<th>Details:</th>
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<tbody>
<tr>
<td>Student Name:</td>
</tr>
<tr>
<td>Student ID:</td>
</tr>
<tr>
<td>Health Agency:</td>
</tr>
<tr>
<td>Ward/Speciality:</td>
</tr>
<tr>
<td>Placement Dates:</td>
</tr>
<tr>
<td>Clinical Educator:</td>
</tr>
<tr>
<td>Timeframe for Challenge:</td>
</tr>
</tbody>
</table>

This Clinical Challenge Contract identifies:

- Learning objectives based on the NMBA Registered Nurse Standards for Practice (2016) criteria to be met within a specified time frame in order to PASS the clinical challenge.
- Strategies identified to support the student in achieving the objectives.
- Clear identification of whether objectives were achieved in the stipulated timeframe.

I have read, understood and agree to the conditions of the Clinical Challenge Contract:

Student signature: ________________________________  Date: _____ / _____ / _____
Clinical Challenge Learning Objectives

*Add as many rows as required for each specific student*

<table>
<thead>
<tr>
<th>Issue identified</th>
<th>Learning objectives</th>
<th>Strategies implemented to assist in meeting learning objectives</th>
<th>Outcome</th>
</tr>
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<tbody>
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</tbody>
</table>
Outcome of Contract (To be Completed by Clinical Educator)

Outcome (please circle):  PASS  FAIL

Any Additional Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Clinical Educator Signature: ____________________________  Date: _____ / _____ / _____  University Notified of Outcome  

Student Signature: ____________________________  Date: _____ / _____ / _____
FACULTY OF HEALTH - NURSING

INJURY NOTIFICATION PROCEDURE

Accidents and injuries to students occur from time to time. To protect the student and maximise workplace safety, certain steps are taken whenever an incident/injury occurs in a clinical workplace. These include injuries or events involving sharps (needlestick) and splashes with actual or potential contaminated body fluids, as well as physical injuries sustained whilst in the workplace. It is in the student’s own interest to ensure that the following processes occur.

Immediate Processes:
The following in red (middle column) MUST occur within 24 hours of the injury/event occurring. Those that are responsible for the reporting are noted. The areas in green (third column) must occur within 5 days of the injury/event occurring:

Within 24 hours

Student to notify educator/supervisor and follow procedures of facilities, completing facility incident reports as necessary

Student/facility to contact clinical coordinator
0428 172 866 (Ballarat/Horsham)
0408 333 197 (Gippsland)

Student to complete university’s Injury Report form (page 1) and fax to 5327 9240, with “In Confidence Attention Clinical Coordinator” on a coversheet

Within 5 days

Facility to provide all level of initial assessment and treatment as per protocols, and follow up as required whilst student is on placement

Clinical coordinator to notify Program Coordinator

Clinical coordinator to complete investigation on page 2 and return signed form to Risk, Health and Safety

A printable PDF version of Federation University’s Injury Report form can be accessed via the following link (located in section 4: Incident and Emergency Management): http://federation.edu.au/staff/working-at-feduni/risk,-health-and-safety/forms-and-templates. However, for your convenience, page 1 (the section that must be filled out by the student involved in the event) is included in this appendix and is acceptable to be used in the case of injury or other event.

Follow up action:

Students should keep a copy of the facility’s incident form and any other documentation raised as a result of the injury or event. Once placement is complete, the student should bring a copy to the clinical coordinator. Students are recommended to attend all follow up appointments and other procedures outlined by the treating facility.
Injury Report Form
Risk, Health and Safety

Send Page 1 to Risk, Health and Safety (ohs@federation.edu.au) within 1 working day of incident

INJURED PERSON
(Injured person to complete page 1 if possible)

Surname:  
Given names:  
Home address:  
Town:  
Postcode:  
Phone:  
Status:  

☐ Staff  ☐ Contractor  ☐ Visitor  ☐ Other (describe)  
☐ Student (circle as applicable: VCAL, VET, Higher Education)

School/Section, employer or organisation:

INCIDENT/EVENT

Date of incident:  
Time of incident:  AM/PM

Location:  
On-campus (specify campus/building/room:  

☐ Student excursion*  ☐ Student work placement*  ☐ Work-related travel*  ☐ Other*

(*Provide precise details of location)

Incident reported to:  
Phone:  

Date reported:  
Time reported:  AM/PM

Witnesses:

Describe what happened and how (attach additional page if required):

INJURY

Location on body:  LEFT/RIGHT

Nature of injury (e.g. burn, cut, sprain):

Treatment:  
☐ None  ☐ First aid  ☐ Ambulance  
☐ Doctor/hospital/medical centre  ☐ Other (describe below)

Name of first aider/doctor/hospital/medical centre:

AUTHORISATION

Signature of injured person (if they completed this form):

Name of person completing this form (if not injured person):

Relationship to injured person:

Reason injured person did not complete this form:

Signature:  
Date:  

This is not a WorkCover or insurance claim form. To make a WorkCover claim, contact the WorkCover Coordinator on 5327 9312. Students who wish to lodge an insurance claim should contact their School Business Manager.

Warning – Uncontrolled when printed. The current version of this document is kept on the University website.

Authorised by:  University Health and Safety Policy Committee  
Document Owner:  Manager – Risk, Health and Safety  
Current Version:  25/11/2014  
Review Date:  11/11/2017
Send completed form to Risk, Health and Safety (ohs@federation.edu.au) within 5 working days of incident.

### INVESTIGATION
(School/Section management to complete page 2)

Supervisor / manager conducting investigation: 

<table>
<thead>
<tr>
<th>Phone:</th>
<th>Email:</th>
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</thead>
</table>

Other participants:

<table>
<thead>
<tr>
<th>Date of investigation:</th>
</tr>
</thead>
</table>

Was injured person interviewed:  

<table>
<thead>
<tr>
<th>☐ YES</th>
<th>☐ NO (whenever possible, it is important to talk to the injured person)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Main Contributing Factors</th>
<th>Corrective Actions</th>
<th>Person Responsible</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

Comments:

Signature of Dean / Director / Safety Officer:  

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<tr>
<th>Date:</th>
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</table>

Signature of Health & Safety Representative:  

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<tr>
<th>Date:</th>
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</thead>
</table>

### OFFICE USE ONLY
Federation University Australia acknowledges receiving notification of the injury as described above

Received by:  

| Date: |

Scanned to file:  

| Copy sent to injured person |

Privacy Statement: The information on this form, which includes health information, is collected for the primary purpose of legal compliance. Another purpose of collection is to eliminate or minimise the risk of a recurrence of incidents. You have a right to access personal information that Federation University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer at privacyofficer@federation.edu.au.

Warning – Uncontrolled when printed! The current version of this document is kept on the University website.

<table>
<thead>
<tr>
<th>Authorised by:</th>
<th>Document Owner:</th>
<th>Current Version:</th>
<th>Review Date:</th>
</tr>
</thead>
</table>
Nursing and Midwifery Board of Australia Nursing Practice Decision Flowchart

START

Activity to achieve desired/beneficial client outcome

Scops of practice
Is the activity within the current/normative scope of nursing practice?

Organisational capacity
Does the organisation have the capacity and resources to support this activity?

Risk assessment
Does this activity need to be performed by a Registered Nurse (RN)?

Appropriate person
Is it appropriate to delegate this activity to another person?

Beneficial outcomes
Is the client likely to benefit from the implementation of this activity?

Organisational support
Is there organisational support for this activity?

Professional consensus
Does this nursing activity require professional consensus?

Supervision
Is the RN supervising this activity?

Assessment of competence
Is the competency of the RN adequate to perform this activity?

Readiness to accept delegation & accountability
Is the RN willing to accept the delegated activity?

Supervision
Is the RN able to provide supervision to support the delegation of the activity?

Deliberate supervise and evaluate outcomes
Does the RN need to deliberate supervise and evaluate outcomes?