

Final Report

Submitted by Bendigo Health

Date: 31st October 2014

Reporting Period: 1st June to 31st October

Project Name: Student Led Feedback Model

Report Given by: Narelle McPhee

Signature /



Position / Date Project Officer - Allied Health Clinical
Support Lead

Contact Details: nmcphee@bendigohealth.org.au -
03 5454 6388



Section 1: Overview

1. Overview of the Project

a) The Aims of the Project

The “Student-led Feedback Model” project aims to improve feedback processes for students and supervisors through the development of an interdisciplinary student led feedback model.

The model provides a structured, time efficient and consistent approach to formative feedback. The tool assisted to clarify student expectations and roles and provided a mechanism for documenting and following up progress. The model enhanced the ability of supervisors, regardless of their experience or training, to provide consistent feedback of a high quality and was implemented across disciplines and across placement settings.

Project objectives included the following:

- To develop and pilot a feedback model that is student led and mitigates the influence of supervision competency deficits. This was to be achieved by:
 - Undertaking a literature review to analyse current models and practice in relation to student-led feedback
 - Documenting current feedback methods used in clinical supervision in partner organisations
 - Drafting a feedback model, a feedback tool, and training materials.
- To evaluate the feedback model and tools developed with nursing and allied health disciplines across large regional and expanded health service settings. This was to be achieved by:
 - Creating a report on face and content validity. Face validity “means that the instrument looks, on the face of it, as if it measures the construct of interest” (DeVon et al 2007). In terms of the student led feedback model, the question will be asked “does the student led feedback model do what it proposes to do?” Content validity is a measure of agreement between experts regarding the content of the construct of interest. Content validity is measured by rating the relevance of each item in the construct using a four point scale (1 = Not relevant and 4 = Extremely relevant). A content validity index (CVI) will then be formulated from the proportion of items that received a rating of three or four. Each item in the Student Led Feedback Model will only be endorsed when the content validity index is 0.83 or above (Lynn 1986).
 - Undertaking a pilot at two regional hospitals and three rural hospitals and trialling one new model of allied health clinical supervision
 - Providing an Evaluation Report to Advisory Groups
- To support expanded settings with a feedback model and tools that are user friendly, consistent, evidence-based and validated by nursing and allied health disciplines, supervisors and learners. This will be achieved by:
 - Ensuring that the model and tools are evaluated and trialled by expanded settings organisations.
- To increase the preparedness of expanded settings services to accept clinical students for whom there is no discipline specific supervision. This will be achieved by:
 - Engaging Bendigo & District Aboriginal Cooperative (BDAC) in a shared placement model for allied health students to rotate through BDAC and Bendigo Health.
 - Providing a consistent supervision and feedback model for composite placements

- Liaison between Bendigo Health and BDAC to support the establishment of a supportive placement model
- To increase supervisor confidence and students' reported level of satisfaction with respect to the feedback they give and receive while on placement across placement locations. This will be achieved by:
 - The development and implementation of quality controlled training processes at all pilot sites
 - Evaluation of the model and student and supervisor satisfaction with the model throughout the project period

b) The Outcomes of the Project

The project achieved its aim and objectives and has resulted in:

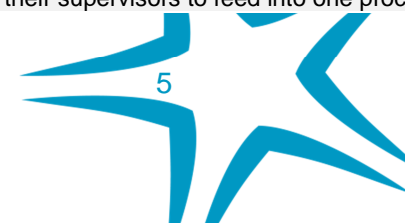
- The establishment of the project advisory group, with representatives from all project partners, which has an ongoing commitment to supporting the model
- Development of a validated student led feedback model and tool
- Pilot and evaluation of the model in allied health and nursing with supervisors and students
- The model and tool being rated as user friendly by 100% of supervisors and 91% of students
- The model and tool resulting in an increase in supervisor satisfaction and confidence with being able to deliver effective feedback
- The model and tool resulting in increased student satisfaction with feedback being provided
- Development of supporting documentation: literature review; guidelines for use, frequently asked question fact sheets for supervisors and students; and development of class room education presentation
- Implementation of a new model of expanded setting clinical supervision in allied health
- Development of a collaborative relationship around clinical placements between the Bendigo District Aboriginal Co-operative, Bendigo Health and the Latrobe Rural Health School



Section 2: Report

Table 1: Objectives Table

OBJECTIVE	HOW WAS IT ACHIEVED?
<p>(Objective 1)</p> <p>To develop and pilot a feedback model that is student led and mitigates the influence of supervision competency deficits</p>	<p>The development of the student led feedback model was informed by:</p> <ul style="list-style-type: none"> • A contemporary literature review of feedback models which identified a variety of models but no gold standard • Student and supervisor focus groups to determine the perceived attributes of effective feedback for inclusion in the model • Content and validity testing of the tool by the project advisory committee. Two rounds of testing and adjustment were required to achieve 83% agreement. <p>The resulting student led feedback model and tool was piloted for a three month period with allied health and nursing students and supervisors at two large regional health services (Bendigo Health and Goulburn Valley Health), two small rural health services (the Rushworth and Tatura campuses of Goulburn Valley Health and Inglewood and Districts Health Service) and one expanded setting (Bendigo District Aboriginal Co-operative).</p> <p>Following the pilot evaluation of the model by students and supervisors was used to make improvements.</p>
<p>(Objective 2)</p> <p>To evaluate the feedback model and tools developed with nursing and allied health disciplines across large regional and expanded health service settings</p>	<p>The student led feedback model was the subject of internal ethics approval processes at Bendigo Health and Goulburn Valley Health. Part of the ethics approval included development of an appropriate evaluation methodology in terms of collection, storage and the questions being asked of participants. Participants were evaluated using approved qualitative and quantitative evaluation methodologies via a student and supervisor questionnaire and supervisor focus groups.</p> <p>At the end of the pilot students and supervisors who received training in the use of the model were surveyed via an online questionnaire to determine if they used the feedback tool and to evaluate its effectiveness.</p> <p>Six supervisor focus groups were performed and a thematic analysis of the results was conducted.</p>
<p>(Objective 3)</p> <p>To support expanded settings with a feedback model and tools that are user friendly, consistent, evidence-based, and validated by nursing and allied health</p>	<p>A new allied health placement model was developed to support a shared clinical placement between Bendigo District Aboriginal Co-operative (BDAC) and Bendigo Health. This represented the first time that an occupational therapy student attended Bendigo District Aboriginal Co-operative as part of their clinical placement. The project advisory committee facilitated the opportunity for collaboration in the development of this placement between BDAC, Bendigo Health and the Latrobe Rural Health School. The model was used to provide a consistent supervision and feedback model for this placement across settings throughout the shared placement.</p> <p>The student led feedback tool provided structure for students and their supervisors to feed into one process rather than requiring</p>



<p>disciplines, supervisors and learners.</p>	<p>supervision training, consistent supervisors or constant observation.</p>
<p>(Objective 4) To increase the preparedness of expanded settings services to accept clinical students for whom there is no discipline specific supervision</p>	<p>The student led feedback model has increased the preparedness of the Bendigo District Aboriginal Co-operative to offer non-discipline specific supervision. An occupational therapy student is currently attending an eight week project placement at BDAC.</p> <p>In the past Bendigo District Aboriginal Co-operative has been invited to participate in the clinical supervisors support program. Through the engagement in the student led feedback model, two BDAC supervisors were enrolled in this training.</p>
<p>(Objective 5) To increase supervisor confidence and students' reported level of satisfaction with respect to the feedback they give and receive while on placement across placement locations.</p>	<p>The student led feedback model provides a framework that promotes and supports a shared responsibility for feedback. This approach to feedback is student centred and also student led. The tool, combined with education regarding the use of the tool and importance of effective feedback, increased supervisor confidence and supervisor and student satisfaction with regards to the delivery of effective feedback.</p> <p>The project team first evaluated the baseline confidence of supervisors and student satisfaction ratings with respect to the feedback they were receiving prior to the implementation of the tool. Additionally focus groups of student and supervisors across disciplines were interviewed to identify what affected supervisor confidence in providing feedback and what students did not like about the feedback that they received from their supervisors. This qualitative information was then distilled, themed and used to inform the student led feedback model and tools. The tools were face and content validity tested. Supervisors and students were educated on how to use the tools and then supervisors and students were asked to rate their confidence levels and satisfaction with the feedback given and received. Because each stage of this process was informed by consumers, the tools delivered significant increases in confidence and satisfaction, despite an already high level of confidence and satisfaction with feedback at the baseline.</p>



Table 2: KPIs/Deliverables Table

Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
October 2014	An increase of 20% in supervisor confidence relating to delivery of effective feedback	Yes	October 2014	There was a 40% increase in supervisors rating their confidence as “very good” and a 100% increase in those who rated their confidence as “excellent” following the use of the tool.
October 2014	A total of 50% of those trained in the use of the tool are actively using the tool in the delivery of feedback	Yes	October 2014	<p>A total of 60 supervisors were trained in the use of the tool as a part of the formal training at the commencement of the pilot. Thirty of these supervisors reported using the student led feedback tool, for a rate of 50% who actively used the tool after being trained.</p> <p>Due to a high level of request from supervisors who did not participate in the initial training to use the tool, a further 31 supervisors were trained in the use of the tool during the pilot period. An additional 13 supervisors who received this training during the pilot reported using the tool (for a total of 44 supervisors reporting using the tool altogether).</p> <p>One hundred and two students were trained in the use of the tool across Bendigo Health, Goulburn Valley Health, Inglewood and Districts health and Bendigo District Aboriginal Co-operative. Fifty-one students reported using the tool for a total of 50% actively using the tool after being trained.</p>
October 2014	An increase of 20% in student satisfaction with the delivery of feedback	Yes	October 2014	Students reported increased satisfaction with feedback provided after the use of the student led feedback tool. Specifically: The format or delivery of feedback 18% increase; Frequency 25% increase; Effectiveness 21% increase; Increasing motivation 35% increase; Achieving goals 29% increase.
October 2014	An increase of 20% in supervisor satisfaction with the delivery of feedback	Yes	October 2014	Supervisors reported a 58% increase (an increase from 19 to 30 responses) in their satisfaction as “very good” and a 500% increase (an increase from one response to six responses) in those who rated their satisfaction as “excellent” following the use of the tool.
October 2014	60 allied health and nursing staff trained in the use of the tool and model across the Loddon Mallee and Hume Clinical Placement Networks	Yes	October 2014	60 allied health and nursing supervisors received formal training at the commencement of the pilot and a further 31 supervisors received informal training during the pilot period. Training sessions occurred at Bendigo Health (x 2), Goulburn Valley Health Shepparton, Tatura and Rushworth, Inglewood and Districts health Service and Bendigo District Aboriginal Co-operative.



Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
Sept 2014	6 Aboriginal community controlled health organisation staff trained in the use of the tool and model	Yes	October 2014	Six Bendigo District Aboriginal Co-operative staff were trained in the use of the student led feedback tool. In addition three podiatry staff from Bendigo Community Health Services who provide podiatry service to BDAC also received training in the use of the tool.
Sept 2014	One new model of allied health/ expanded clinical supervision implemented in 2014	Yes	Sept 2014	A shared supervision model in occupational therapy between Bendigo Health, the Bendigo District Aboriginal Co-operative and the Latrobe Rural Health School was developed as a result of this project. The student attended placement for 8 weeks in September and October 2014.
Sept 2014	One new model of expanded setting placement implemented in 2014	Yes	Sept 2014	Bendigo District Aboriginal co-operative are, for the first time, hosting students in a shared clinical placement with Bendigo Health using a non-discipline specific supervision model which has been enabled by the student led feedback tool. In addition to this, BDAC are considering offering their own project based clinical placements in 2015.
October 2014	Communicate and promote the use of the model to stakeholders	Yes	October 2014	Loddon Mallee CTN Official Launch conducted at Bendigo 13/10/2014 with 44 people in attendance, Hume CTN Official Launch conducted in Shepparton 22/10/2014 with 14 people in attendance, Presentation of the model to Loddon Mallee Clinical Training Network 10th September; Loddon Mallee Allied Health Network Reference Group 13/10/14; Bendigo Health Research Seminar Series 14/10/2014. Abstract submitted to the Australia New Zealand Association for Health Professional Educators Conference, March 2015. Invitation to present at the Dietitians Association of Australia Conference, May 2015. Abstracts are also to be submitted to the Loddon Mallee Allied Health conference, March 2015; National Rural Health Conference, May 2015.
October 2014	Make the framework and tools available online to stakeholders	Yes	October 2014	The framework and tools will be made available via the Victorian Health Workforce Knowledge Bank. In addition the Student Orientation Space will also host the tools. TELL Centre (Teach Educate Learn Lead) which hosts the clinical supervision program, Teaching on the Run has also expressed interest in providing the framework and tools as part of



Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
				<p>their community of practice website.</p> <p>The project is currently in discussions with Latrobe University regarding having the tool available to students via www.armlatrobe.com. A meeting has been scheduled with the Latrobe University Clinical Practice Education Committee on the 20th November to discuss this opportunity.</p>
October 2014	Develop policies and protocols to promote standardisations in the model's adoption across difference disciplines and settings	Yes	October 2014	The results of the evaluation of the student led feedback model informed the development of guidelines to guide the use, future implementation and development of the student led feedback tool.
October 2014	Make policies and protocols available to stakeholders via viCPortal	Yes	October 2014	The results of the evaluation of the student led feedback model informed the development of guidelines regarding the future use of the student led feedback tool and also the development of frequently asked questions fact sheets, for both supervisors and students. These documents are available to be uploaded onto viCPortal once approved by the Department of Health.
October 2014	Train key staff in each participating organisation to be education champions	Yes	October 2014	Champions have been identified at all partner agencies. All champions have had experience with using the student led feedback tool and have received education regarding its use.
October 2014	Develop education package that can be used as an ongoing resource	Yes	October 2014	The education package developed during the project includes: <ul style="list-style-type: none"> • A power point presentation; • Student and supervisor feedback evaluation templates; • Guidelines for use of the tool; • Frequently asked questions; • A video of a student and supervisor experience; and
June 2014	Bendigo health to seek opportunities to develop an e-learning package to support the use of the model beyond the project time frame	Yes	June 2014	Bendigo Health's iLearn team are currently adapting the education package resources from the student led feedback model to be included on this learning management system with online student orientation and as part of its supervisor education strategy.
October 2014	Annual stakeholder evaluation via survey monkey Bendigo Health (CHERC provides ongoing lead role to	Yes	October 2014	Stakeholders who engaged in the pilot of the student led feedback model were asked to participate in the evaluation of the model and their own experience with the tools. This evaluation is provided in the education package and can be used by any organisation that chooses to adopt and implement the model in the future.



Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
	review need for improvements			
February 2014	Literature Review	Yes	February 2014	<p>The literature review identified 49 articles for review and seven models of feedback for the project advisory group to consider in choosing an appropriate feedback model for this project. Literature from 1980 to 2014 was considered in the review and then simplified in a feedback model matrix for consideration.</p> <p>The findings can be summarised as:</p> <ul style="list-style-type: none"> • 7 different feedback models identified – none of which were student centred • No one model meets all elements of the recommended characteristics of effective feedback <p>The project advisory group identified that a composite feedback model would need to be developed. This validated the development of a student led model rather than simply adopting an existing model. The evidence base from the literature review also engaged and informed the advisory group in the model and tool development.</p>
February 2014	Profile of current feedback methods used in clinical supervision at partner organisations	Yes	May 2014	<p>The profile of current feedback methods used in clinical supervision was established as part of the focus groups that were conducted. The focus groups were important to the overall development of the feedback tool and identified that feedback methods employed by clinical supervisors varied significantly between supervisors and were often informed by experience, training or a lack thereof.</p>
June	Draft feedback model and tool	Yes	June 2014	<p>The student led feedback model was developed based on the literature review, student and supervisors feedback groups and face and content validity testing.</p>
June 2014	Face and Content validity report	Yes	June 2014	<p>On completion of the development stage, the student led feedback model was evaluated by the Project Advisory Group by calculating content validity index. Content validity is a measure of agreement between experts regarding the content of the construct of interest. Respondents were asked to rate the relevance of each item in the student led feedback tool using a four-point scale (1 = Not relevant; 2 = somewhat relevant; 3 = quite relevant; 4 = extremely relevant). A content validity index was then formulated from the proportion of items that received a rating of three or four by the project advisory group (Waltz & Bausell, 1981). Each item in the Student Led Feedback Model can only be endorsed when the content validity index is 0.83 or above (Lynn 1986). Therefore two rounds of testing were required to meet these criteria.</p>
June	Feedback tool and model	Yes	June 2014	<p>An education package that included a classroom power point presentation, participant handout</p>



Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
2014	training package			and participant evaluation was developed to maximise the rate of participation in the piloting of the student led feedback tool.
June 2014	Deliver education and training on use of the tool and model to supervisors/preceptors and students	Yes	September 2014	Two education sessions were conducted at Bendigo Health One education session was conducted at each Goulburn Valley Health site Shepparton, Rushworth and Tatura; Inglewood and Districts Health Service and Bendigo Districts Aboriginal Co-operative. These education sessions were delivered at a time convenient to the health service that coincided with student placement activity.
Sept 2014	Pilot is conducted at two large regional hospitals and three small rural hospitals	Yes	September 2014	The student led feedback tool was piloted with 53 allied health and nursing students and 44 supervisors at two large regional health services being Bendigo Health and Goulburn Valley Health, Shepparton and three small rural health services, being Goulburn Valley Health Rushworth and Tatura campus and Inglewood and Districts Health Service. The following is submitted as evidence of completion : <ul style="list-style-type: none"> • Results from the electronic survey of both supervisors and students • Thematic analysis of qualitative data obtained from supervisor focus groups.
Sept 2014	Trial of one new model of allied health clinical supervision.	Yes	September 2014	One new model of allied health clinical supervision was developed and supported by the student led feedback model. A shared model of supervision between Bendigo District Aboriginal Co-operative (BDAC) and Bendigo Health was developed. For the first time an occupational therapy student from Latrobe Rural Health School participated in an 8 week shared clinical placement.
October 2014	Evaluation report is submitted to the project advisory group	Yes	October 2014	The evaluation report was provided to the Project Advisory Group via email and will be discussed at the next advisory group meeting in November 26 th , 2014.
August 2014	Culturally sensitive model and tool is developed	Yes	August 2014	The project advisory group included a representative from BDAC. This representation was important in the development of a culturally sensitive tool. BDAC representatives were consulted regarding the changes that needed to be made to the tool to ensure that a culturally sensitive and acceptable tool was developed. Advice was also sought from Bendigo Health's Aboriginal Liaison Officer. As a result of this consultation the student led feedback tool was modified to reflect BDAC colours. Using BDAC colours aimed to increase the acceptance of the tool by supervisors at BDAC and for the tool to be identified as a BDAC document. The BDAC tool was



Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
				presented to supervisors at a focus group and feedback was sought regarding any further changes required to increase the cultural sensitivity of the tool. Nil further suggestions were received and all supervisors who received education regarding the tool indicated they would be happy to use the tool.
October 2014	Six clinical supervisors from BDAC participate in training	Yes	October 2014	Six supervisors from BDAC and three supervisors from Bendigo Community Health Services were trained in the use of the tool prior to the commencement of the first clinical placement to take place at BDAC.
	Tool and model are utilised by six BDAC clinical supervisors	Yes	October 2014	The Occupational Therapy student who completed the placement across Bendigo Health and BDAC had six supervisors over a period of eight weeks and the student led feedback tool helped to blend some of the nuances between the supervisors' feedback experience.
October 2014	Develop recommendations and action plan for alternative clinical supervision models to be implemented locally and state wide.	Yes	October 2014	Five local and nine state wide recommendations and accompanying action plans for alternative clinical supervision models were developed. Local recommendations and action plan for alternative clinical supervision models can be found in content file 38; State-wide recommendations and action plan for alternative clinical supervision models can be found in content file 39; and a case study detailing the alternative clinical supervision model developed can be found in content file 37.
October 2014	BPCLE Indicator 49 staff are positive in regard to feedback mechanism and measures are in place	Yes	October 2014	The BPCLE staff survey was made available to staff in September 2014. To date there has been 134 responses from medicine, nursing and eight allied health disciplines.
October 2014	BPCLE Indicator 50 Learners are positive in regard to the feedback mechanism that are in place	Yes	October 2014	BPCLE student survey data was used to compare the months before the pilot of the student led feedback tool (1/1/2014-12/7/2014) and during the student led feedback pilot period (13/7/2014 - 31/9/2014) in regards to the question "please rate your satisfaction with the process by which clinical support nurse/clinical educator or supervisor provided you with feedback" Before the student led feedback tool pilot 109 students had responded to the survey and, 59% of respondents were very satisfied with the feedback process that was provided. During the pilot period 79 students responded to the survey and 68% of respondents reported being very satisfied. The satisfaction rating increased during student led feedback pilot period.



Due Date	KPI	Achieved? Yes / No	Date Delivered	Outcomes
October 2014	Increase 10% number of students receiving non-discipline specific supervision	Yes	October 2014	Bendigo District Aboriginal Co-operative increased their clinical placement offering in 2014 from zero to 1 occupational therapy student for a period of 8 weeks. The placement was a composite placement with Bendigo Health and represented a 100% increase in clinical placement activity on the previous year. The student was supervised using a non-discipline specific supervision model while on placement at BDAC.
30 June	80% content validity index	Yes	30 June	83% validity index was achieved after two rounds of validity testing using the project advisory group.
October 2014	80% users rate the tool as user friendly	Yes	October 2014	100% of supervisors who used the tool, reported that the student led feedback tool and process was user friendly 91% of students who used the tool reported the student led feedback tool and process was user friendly



Section 3: Review

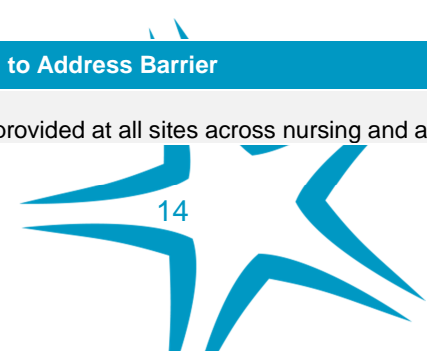
a) Barriers and Enablers

Governance

Barriers	Action Taken to Address Barrier
<p>Gaining ethics approval within the timelines of the project caused a delay in commencing the pilot of the tool. This was exacerbated by the need to gain multi-site ethics approval for this project. The Goulburn Valley Health Human Research Ethics committee only meets on a bimonthly basis therefore ethics approval was only granted for this site in May.</p>	<p>The Project Advisory Group representative from Goulburn Valley Health was engaged to support the completion of the site-specific Ethics application for Shepparton. Additional project officer resources from the CHERC team were directed toward supporting the timely completion of the Bendigo Health Ethics application.</p>
Enablers	Result
<p>A Project Advisory Group (PAG) of key stakeholders was convened to provide guidance and direction to ensure that the project achieved its stated aim and objectives. The advisory group met monthly and membership included both clinical experts and consumers (including supervisors and students) and representation from all stakeholder groups.</p>	<p>Having consumer representation (students and clinical supervisors) on the advisory group ensured that the advisory group had a strong consumer reference and input and ensured that the model developed remained practical, achievable and not overly academic in nature. It also contributed to the overall sustainability of the project's deliverables as well as adoption by the project's key stakeholders: supervisors and health science students.</p> <p>The PAG provided the expertise required to advise the student led feedback tool's face and content validity testing.</p>

Communications and Stakeholder Engagement

Barriers	Action Taken to Address Barrier
<p>The uptake of the tool in the smaller rural health services (Inglewood and Districts</p>	<p>Training was provided at all sites across nursing and allied health supervisors and</p>



Health Service and Goulburn Valley Health Tatura and Rushworth campuses) was lower than in the larger regional services partly due to the limited number of placements occurring in these settings during the pilot period. Bendigo Health was the only site where there were responses from allied health supervisors and students largely due to lack of allied health clinical placements in other sites.

The use and satisfaction with the tool in placements of 2 weeks or less was lower than that associated with longer placements. While it was worthwhile testing the acceptability of the tool with shorter placements, the lack of uptake with shorter placements may have been predicable with better engagement of stakeholders prior to the commencement of the project.

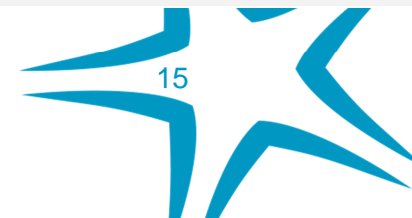
students. Champions were addressed in each of the services to support local engagement with use of the tool. This included an allied health champion at Goulburn Valley Health where there were allied health clinical placements planned.

Supervisors and students were provided with flexibility around use of the model depending on the length and setting of the placement. The feedback provided around the acceptability of the model with shorter placements has been taken into account with regards to future recommendations for use of the model.

Enablers	Result
<p>There were strong existing relationships between CHERC and regional health services and education providers through previous collaborations on a number of initiatives including the regional Health Workforce Australia partnership.</p> <p>There was excellent uptake of the tool amongst allied health disciplines at Bendigo Health. This was assisted by strong support from allied health managers for supervisors and students to attend training and focus group sessions.</p>	<p>The existing relationships enabled timely and successful engagement of members of the Project Advisory Group and senior managerial support for the project in each of the project partners' health services. The inclusion of the La Trobe Rural Health School assisted with providing strategic direction for the project and the engagement of consumer representatives. Collaborative development of the model assisted with engagement and will help to build upon existing relationships.</p> <p>The evaluation demonstrates good uptake of the tool across a range of supervisors and students from allied health disciplines at Bendigo Health and high levels of satisfaction with use of the tool amongst this cohort.</p>

Staffing

Barriers	Action Taken to Address Barrier
<p>Although the nominated level of staffing for this project was estimated appropriately at the time of submission, the contracted timelines (contract acquittal) placed unanticipated pressure on the project team.</p>	<p>Other CHERC project officers have been engaged to support activities of the project as required (e.g. developing ethics application, assisting with running training and focus groups) to assist meeting deadlines. Future submissions will take this issue into consideration.</p>



Enablers	Result
<p>The CHERC Operations Manager and the Allied Health Education and Research Manager have provided oversight of the project management for this project. This project has also required the support of senior managers across partner organisations.</p>	<p>This has proven valuable in ensuring that key stakeholders have been engaged to support the project and to overcome potential risks and barriers such as ethics approval.</p>

Budget

Barriers	Action Taken to Address Barrier
<p>Tight project timelines leading to the risk of not being able to acquit/expend the project funds within the project period.</p>	<p>Regular meetings between the project lead and project staff to discuss budget, stakeholder engagement, progress and issues. Liaison with Bendigo Health Finance department to confirm timelines and information required for acquittal.</p>

Enablers	Result
<p>The in-kind contribution from Bendigo Health (0.05 FTE CHERC Operations Manager and 0.1 FTE Allied Health Education and Research Manager).</p> <p>The financial contribution to support partner organisations in backfill of staff to attend training.</p>	<p>The in-kind contribution has been vital to the success of the project particularly with regards to project management support.</p> <p>The financial contribution to the partner agencies has greatly assisted with engaging supervisors and student to pilot the tool particularly at Goulburn Valley Health.</p>

Other

Barriers	Action Taken to Address Barrier
Enablers	Result



Section 3: Next Steps

a) Sustainability

What will continue?

The model and associated tools will be made available to each of the partner organisations and more broadly to a range of clinical placement stakeholders to support use in other settings.

Access to the model will include a range of supporting documentation:

- The Student Led Feedback tool – student and supervisor versions of the tool
- Guidelines and indications for use of the model and the associated tools
- Frequently asked question resources for students and supervisors
- A classroom training resource to orientate students and supervisors to the model
- Literature review: Effective feedback for learners in allied health and nursing

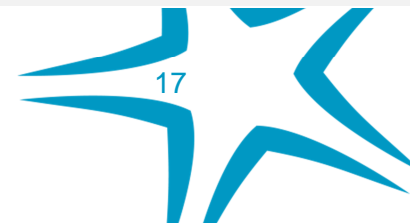
Who will continue it?

Use of the model will continue in each of the project health services: Bendigo Health, Goulburn Valley Health (including Rushworth and Tatura campuses), Inglewood and Districts Health Services and the Bendigo and District Aboriginal Cooperative. Student Led Feedback Model champions have been identified at each of the partner organisations. Each champion has attended education, has had experience with using the model and will have access to the model and associated tools. The Project Advisory Group will be engaged to establish a Community of Practice (with representation from each of the project champions) to collaboratively plan and share future applications of the model.

La Trobe university plan to continue to promote use of the model across allied health and nursing students and supervisors. It is planned that the tools will be made available on the new La Trobe University Academic Research Network (ARN) learning management system.

The student led feedback model will also be incorporated into the Clinical Supervision Support Program at Bendigo Health. This training provides multi-disciplinary education to supervisors at Bendigo Health and in the Loddon Mallee Region.

It is anticipated that the model will be taken up in a range of clinical education settings once it is made available and promoted. This will be achieved by targeted promotion to health service educators and supervisors and education providers and students. Access to the model and associated resources will be possible through the Department of Health's Victorian Health Workforce Knowledge Bank and further communications will occur at conferences and within relevant education networks.



How will it continue? (funding, support, etc.)

The model in its current form is largely self-sustaining. Once students and supervisors have access to the model and supporting tools it is anticipated that there will be limited training required to support its use. Guidelines and resources for use have been developed to provide targeted education for both supervisors and students in using the tool including a PowerPoint classroom presentation, guidelines for using the model and frequently asked questions. The literature review will be made available to provide an evidence base and justification for stakeholders considering uptake of the model. The use of champions in the pilot to encourage use of the model was successful and this could be a worthwhile strategy to support its broader uptake.

The model will be promoted to a range of stakeholder audiences both locally and at state and national conferences. Abstract submissions have been made or are planned for a number of conferences in the allied health, nursing, rural health and clinical education sectors.

Several future opportunities have been identified to support on-line access to the tool to assist with making it more broadly available. The development of electronic versions of supporting documentation, including on-line tutorials, would support the inclusion of the tool on the Department of Health's Student Orientation Space. An electronic version of the tool in the form of an electronic document or application would not only improve access but would also increase flexibility with how the tool is used. It could allow students and supervisors to input into the tool remotely or in circumstances where there are multiple supervisors or students involved. Development of these on-line resources was not a part of the scope for this project but could be considered in future funding opportunities.

While the model has been developed with undergraduate students in mind and piloted with this cohort it has been identified during the pilot that it is potentially applicable more broadly to other learner and supervision settings including post-graduate students, new graduates and staff supervision and mentoring. Again this was not part of the scope for this project but a pilot and recommendations for uptake of the model in these cohorts could be considered in future funding opportunities.



b) Project Materials Submission

CONTENT

Content file 1

File Name: Student Led Feedback Supervisor Tool

Resource Type	Student resource
---------------	------------------

Content file 2

File Name: Student Led Feedback Student Tool

Resource Type	Student resource
---------------	------------------

Content file 3

File Name: Student Led Feedback Student Tool - Workbook

Resource Type	Student resource
---------------	------------------

Content file 4

File Name: Student Led Feedback Student Model Guidelines for use

Resource Type	Guidelines
---------------	------------

Content file 5

File Name: Student Led Feedback Student Model FAQ Students

Resource Type	Student resource
---------------	------------------



Content file 6

File Name: Student Led Feedback Student Model FAQ Supervisors

Resource Type	Supervisor resource
---------------	---------------------

Content file 7

File Name: Student Led Feedback Model - Bendigo District Aboriginal Co-operative Student Tool

Resource Type	Student resource
---------------	------------------

Content file 8

File Name: Student Led Feedback Model - Bendigo District Aboriginal Co-operative Student Led Feedback Student Workbook

Resource Type	Student resource
---------------	------------------

Content file 9

File Name: Student Led Feedback Model - Bendigo District Aboriginal Co-operative Supervisor Tool

Resource Type	Supervisor resource
---------------	---------------------

Content file 10

File Name: Literature Review

Resource Type	Supervisor resource
---------------	---------------------

Content file 11

File Name: Evaluation Report - Supervisors

Resource Type	Report
---------------	--------



Content file 12

File Name: Evaluation Report - Students

Resource Type	Report
---------------	--------

Content file 13

File Name: Thematic analysis focus groups

Resource Type	Report
---------------	--------

Content file 14

File Name: Student Survey

Resource Type	Survey/questionnaire
---------------	----------------------

Content file 15

File Name: Supervisor Survey

Resource Type	Survey/questionnaire
---------------	----------------------

Content file 16

File Name: Training schedule

Resource Type	Training material
---------------	-------------------

Content file 17

File Name: Pilot Education regarding student led feedback for students

Resource Type	Training material
---------------	-------------------



Content file 18

File Name: Pilot education regarding student led feedback for supervisors

Resource Type	Training material
---------------	-------------------

Content file 19

File Name: Student evaluation of education regarding student led feedback during the pilot

Resource Type	Report
---------------	--------

Content file 20

File Name: Supervisor evaluation of education regarding student led feedback during the pilot

Resource Type	Report
---------------	--------

Content file 21

File Name: Flyer for education regarding student led feedback during the pilot

Resource Type	Communication material
---------------	------------------------

Content file 22

File Name: Power point presentation for the launch of student led feedback model

Resource Type	Training material
---------------	-------------------

Content file 23

File Name: Flyer for the launch of student led feedback model, Loddon Mallee Region

Resource Type	Communication material
---------------	------------------------



Content file 24

File Name: Flyer for the launch of student led feedback model, Hume Region

Resource Type	Communication material
---------------	------------------------

Content file 25

File Name: Agenda for the launch of student led feedback model, Loddon Mallee Region

Resource Type	Communication material
---------------	------------------------

Content file 26

File Name: Evaluation pro-forma

Resource Type	Training material
---------------	-------------------

Content file 27

File Name: Student led feedback model and the link to BPCLE

Resource Type	Staff resource
---------------	----------------

Content file 28

File Name: Education for students regarding the use of the student led feedback tool.

Resource Type	Training material
---------------	-------------------



Content file 29

File Name: Education for supervisors regarding the use of the student led feedback tool.

Resource Type	Training material
---------------	-------------------

Content file 30

File Name: Attendance record for education regarding the use of the student led feedback tool.

Resource Type	Template
---------------	----------

Content file 31

File Name: Supervisor experience regarding their use of the student led feedback tool.

Resource Type	Video
---------------	-------

Content file 32

File Name: Student experience regarding their use of the student led feedback tool.

Resource Type	Video
---------------	-------

Content file 33

File Name: Face and Content Validity Report

Resource Type	Report
---------------	--------



Content file 34

File Name: Communication report

Resource Type	Report
---------------	--------

Content file 35

File Name: Alternative Clinical Supervision Model Case Study

Resource Type	Staff resource
---------------	----------------

Content file 36

File Name: Local recommendations and action plan for alternative clinical supervision models

Resource Type	Report
---------------	--------

Content file 37

File Name: State wide recommendations and action plan for alternative clinical supervision models

Resource Type	Report
---------------	--------

