

CPN Strategic Projects

Case study

BPCLE: Quality in clinical placements in the Loddon Mallee

Project summary

The Best Practice Clinical Learning Environments (BPCLE) Framework (hereafter referred to as 'the Framework') produced under the Victorian Department of Health's Clinical Placement Strategy (Clinical Placements in Victoria: Establishing a Statewide Approach) was developed to ensure that an emphasis on increasing clinical placement capacity within the sector does not adversely impact the quality of clinical education. The Framework aims to facilitate and sustain partnerships between stakeholders by outlining the six key Elements that underpin quality clinical learning environments for students and early graduates. These are:

- Element 1: An organisational culture that values learning
- Element 2: Best practice clinical practice
- Element 3: A positive learning environment
- Element 4: An effective health service-training provider relationship
- Element 5: Effective communication processes
- Element 6: Appropriate resources and facilities

Although the Framework is a positive step for Victoria's Clinical Placement Networks (CPNs), the Framework itself is not mandated or compulsory to adopt and there is work for stakeholders and therefore costs associated with the implementation of the BPCLE model to each provider. Consequently the degree to which, if at all, the Framework principles are likely to be adopted will vary between clinical placement providers.

The Loddon Mallee Region (LMR) has been leading the implementation of new clinical placement governance arrangements in Victoria as the 'pathfinder' and its CPN regional counterparts have benefited from the work the LMR CPN had completed prior to their subsequent formation. Through this project the LMR CPN intends to implement the Framework locally as the pathfinder and provide information products outlined in the project deliverables which other CPN regions can then use to navigate implementation of the Framework in 2012.

The aim of this project was to implement the Framework and resources throughout the LMR through cross-sectoral collaboration and cooperation and develop a pathfinder project report that can be used by other CPNs to navigate barriers and inform framework adoption strategies developed in their own regions.

The project objectives were:

- Promulgate the benefits of the Framework and resource templates available to the LMR Clinical Placement Providers (CPP).
- Identify and engage adoption champions to support and encourage implementation of quality indicators/best practice standards as identified in the Framework and resource templates.
- Identify barriers and solutions to encourage adoption.
- Document findings of the LMR CPN's implementation of the Framework.

Drivers and challenges

Challenges

- Establish current level of understanding of the Framework across LMR
- Establish a baseline of implementation for each CPP against the Framework
- Enable CPPs to navigate the Framework
- Understand what the issues were for CPPs in adopting the Framework.

Drivers

- Release of the Framework and supporting documentation.

Arriving at a solution

The project team chose to target a range of CPPs across LMR to establish the current status of the Framework awareness, understanding and implementation. This approach would enable them to elicit an adequate depth of detail regarding the current awareness and understanding of the Framework Elements and the barriers and enablers to the adoption of the Framework.

Implementation process

Project officers were engaged to undertake the project, in-line with the submitted project plan. The stakeholder reference group was identified, and consulted regarding subsequent project activities. The project team chose to target a range of clinical placement providers across LMR to establish the current status of the Framework awareness, understanding and implementation. This approach enabled them to elicit an adequate depth of detail regarding the current awareness and understanding of the Framework Elements.

The draft Framework was assessed and tools developed to promote the Framework across the region. As the Framework appears complex and can therefore be a barrier to its adoption some of the material developed endeavoured to simplify it into easily understood documents and presentations that mimicked other quality Frameworks already in use at health services.

A questionnaire was developed to assess the level of adoption of the Framework in health services and ultimately produce a gap analysis for that health service to use and plan for future activities within this area.

Key representatives from each CPP were interviewed with the purpose of ultimately completing a gap analysis for their specific organisation. This interview process also comprised an education component, to promulgate the Elements and the benefits of implementing the Framework. This was augmented through the use of a slideshow presentation that summarised the Elements, and the benefits of the Framework, and the provision of a summary document that detailed the Elements, the sub-objectives and the indicators. Background information regarding the development of the Framework, the sub-objectives, the indicators, the resource kit and the implementation and monitoring Framework were also covered during the interview.

The tools and resources that have been developed by the project team are available on request.

Challenges for this project were mostly around the delay in the release of the 'best of' documentation and the subsequent changes to the indicator wording and relevance categories (relating to prioritisation of monitoring) in the final published reports and resources. These challenges hindered the promotion of the documentation to health services as the information previously developed by project officers at Bendigo Health (BH) needed to be adjusted to reflect them. An extension for this project and its deliverables was requested and given as a means of addressing these issues.

Due to the late roll out of the final documentation the originally proposed format of group workshops and presentations had to be modified to interviews of a representative selection of CPPs. A total of nine CPPs were approached to be involved in this project and were interviewed with the purpose of ultimately completing a gap analysis for their specific organisation. This resulted in ten sets of data being collected as one of the CPPs provided data for both nursing and allied health clinical placements.

As the Framework was developed for applicability across settings, and as thus the terminology and concepts have been reduced to common dominators, this produced a limitation in the production of the gap analysis document. To ensure the range of settings and disciplines were accounted for, the question wording need to reflect the concepts and sub-objectives of the Framework. This resulted in questions that were sometimes ambiguous, due to the variation in the clinical placement provider settings, disciplines and learner volumes in the interviewed settings, and the relevance to these circumstances not clearly elicited. To address this issue, one-on-one completion and explanation of the questionnaires was undertaken, to reduce the risk of misinterpretation, and increase questionnaire completion.

There were also issues regarding the complexity of the published resources, and how this has impacted on the production of supporting tools/documents to facilitate BPCLE implementation and evaluation of that implementation. To address this, a suite of documents that assist with the simplification of the Framework was developed and made available to participating health services.

Some of the kit resources were found to duplicate other available resources, e.g. the Health Service Capacity Resource duplicates the capabilities of the viCPlace resource to be released in the future, which caused some confusion for CPPs as well. Education regarding the resources was developed and given as a part of the interview process prior to completion of the questionnaire. These resources have been included with this report as previously mentioned.

The actual interview process itself was long and therefore had the potential to be a burden for the participating health service. This issue was managed through the provision of a gap analysis for that health service against which they can plan the adoption of the Framework. It also provided them a baseline for the measurement of improvements they make which, in itself, can be time consuming for staff. Other key drivers were associated with initially promulgating the Elements of the Framework and benefits to CPPs implementing said Framework.

Evaluation

The key findings of this strategic project are:

- The Framework Elements are well recognised, accepted and already, to a certain degree, implemented across a variety of CPPs within the LMR.
- Ongoing support and resources are required to address the universal barriers to the successful implementation of the Framework and its associated performance monitoring framework.
- The undertaking of the gap analysis has been a positive step for a number of LMR CPPs in formalising the implementation of the Framework within organisations.
- The Framework itself was seen as a positive; once it was introduced to the CPPs in a manner that simplified it for them and showed that they were often along the way towards its implementation.
- The tools provided as a part of the Framework were also seen as ways to assist in the achievement of the various Elements.
- Some of the tools provided supported areas that staff at CPPs had wished to pursue within their organisation but had found time and resources a limiting factor. Having the tools made their goals seem more achievable.

Future directions

All the tools developed as a part of this project have been made available to the health services to assist them with the adoption of the Framework. When the results of the gap analysis are returned to the participants a further education of the available resources and what they could use from this to address their particular gaps will occur.

There are plans to conduct further workshops on BPCLE throughout the region as a part of the ongoing education and support to assist with its adoption. Having resources at BH available to access by staff at the CPPs also provides a more positive attitude to adoption of the Framework.

The LMR CPN Information Support Officer will utilise the tools, including the power point, summary documents and gap analysis tools to progress the implementation of the Framework across the region.

Further information

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