#  Portland-Heywood Clinical Placement Partnership

# FINAL

# Memorandum of Understanding

# between

# Active Health

# Dhauwurd Wurrung Elderly Community Health Service Inc

# Heywood Rural Health

# Portland District Health

# Winda marra Aboriginal Co-operative

# October 2012 – December 2013

# PART 1 Preliminaries

In 2011 Dhauwurd Wurrung Elderly Community Health Service Inc ( DWECH) applied for Victorian Government and Health Workforce Australia funding to introduce undergraduate clinical placements in culturally supported settings.

In 2012, the partnership was invited to apply for additional funding to expand the number of settings, students and disciplines.

Both submissions were successful and the project objectives include:

1. Deliver best practice in clinical placements to 23 students for 455 hours;
2. Placements attracting students from medicine, nursing, podiatry, social work, audiology, physiotherapy, pharmacy, occupational therapy and dietetics;
3. Develop and evaluate a partnership model across five organisations;
4. Develop clinical placement tools that reflect best practice including resources that support orientation to the Portland and Heywood communities; a student and clinical supervisors manuals covering all disciplines and incorporating cultural safety across all settings;
5. Build clinical supervision capacity for organisations;
6. Develop and deliver cultural safety education material to students and supervisors;
7. Refurbish the DWECH Wellington Rd campus to provide a low fidelity primary health care laboratory, classroom, supervisors space and five studio apartments for student accommodation.
8. Evaluate the project and deliver project recommendations.

In March, the DWECH Clinical Placement Steering Group formed to co-operate and support the achievement of these objectives. In July 2012, the Group was introduced to the Department of Health’s VicPlace software that will support one project objective ie to develop the partnership model.

This Memorandum of Understanding sets out a framework of co-operation between partners and outlines their contribution to the project deliverables. This MOU is not intended to create legally binding obligations on the partners.

# PART 2 Principles

The partner’s value and are committed to:

* Respectful co-operation;
* Working collaboratively and cooperatively together;
* Open communication and consideration of the views of partners;
* Integrity in all its actions;
* Respect for cultural safety;
* Respect for roles and competencies;
* Confidentiality
* Adherence to proper standards of probity.

The partnership is guided by the Department of Health’s Best Practice Clinical Practice Learning Framework[[1]](#footnote-1)

# PART 3 Roles and Responsibilities

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| --- | --- | --- |
| **Agency**  | **Role**  | **Actions / KPI’s** |
| 1. **Active Health**
 | Cultural Safety Education Student Manual and Clinical Supervision Manual  | 1.1 Provide opportunities for students to attend cultural safety education at DWECH1.5 Commit to reviewing drafted material and content relevant to Active Health  |
| 1. **DWECH**
 | Project Co-ordination & Evaluation Development of Best Practice SupportsCultural Safety Education Infrastructure – DWECH Wellington Rd campusStudent placement logisticsCultural Safety Education Pharmacy placement  | 3.1 DH and BSW Clinical Network liaison and reporting3.2 Secretarial and governance leadership to partners and Department of Health 3.3 Establish systems to measure project evaluation and sustainability goals. Write Evaluation Specification and co-ordinate the appointment of evaluator3.4 Heywood and Portland community manual3.5 Student manual for all disciplines and partners3.6 Clinical supervisors manual across all disciplines and partners3.7 Liaise with Barwon Health for clinical supervision capacity building including survey, training and mentoring3.9 Develop cultural education materials suitable for student clinical placements3.10 Provide opportunities for cultural education to students at DWECH3.11 Refurbish to provide for a classroom, supervisors space, low fidelity primary health care laboratory, five studio apartments for students 3.12Allocate staff time for one contact person to liaise with DWECH placed students and the project’s Clinical Placement Partnership Co-ordinator3.13 Develop the partnership with the Victorian Pharmacy Guild and retail pharmacy outlets in Portland and Heywood |
| **4.0 Heywood Rural Health** | Student placement logisticsCultural Safety Education Clinical supervisionProject Evaluation Community, Student l and Clinical Supervision Resources  | 4.1 Allocate staff time for one contact person to liaise with HRH placed students and the project’s Clinical Placement Partnership Co-ordinator 4.2 Provide opportunities for students to attend cultural safety education at DWECH4.3Work with DWECH to identify staff for clinical supervision training and mentoring4.4 DWECH Clinical Partnership Project EvaluationCollaborate with DWECH to establish systems for the collection of information to satisfy project evaluation and recommendations including information requests from the Department or Clinical Placement Network4.5 Commit to reviewing drafted material and content for the community, student and clinical supervision resources. |
| 1. **Portland District Health**
 | VicPlace Co-ordination Student placement readiness and safety Clinical SupervisionStudent assessmentCommunity, Student and Clinical Supervision Resources  | The CPPC, as a part of the DWECH Clinical Placement Partnership will:* Manage the placement of undergraduate nursing, allied health and medical students[[2]](#footnote-2) across partners and settings
	+ Liaise with partners to determine their ability to offer clinical placement places including: student discipline; placement type; placement dates and duration.
	+ Manage VicPlace on behalf of education providers and clinical placement settings
	+ Keep partners up to date with VicPlace responses relevant to their clinical placement settings
	+ Liaise with all students and settings to manage placement requirements including:
		1. Safety checks[[3]](#footnote-3)
		2. Ensuring contractual obligations between the education provider and settings are met at the commencement and completion of the student placements.
		3. Direct students to accommodation option and inform accommodation providers of student placement cancellations where possible
		4. Student placement schedule within and across settings
		5. Student access to community orientation resources
		6. Student access to student manuals
		7. Identify the Student Liaison Contact Person in each placement setting
		8. Confirm that clinical supervision arrangements meet education provider requirements
		9. Confirm assessment expectations arrangements and timelines with Clinical Supervisors for each placement
		10. Document and communicate information relating to items 4 to 9 with all parties
		11. Complete student and placement statistical reporting to the Department
		12. PDH will provide a form letter to the relevant partners (DWECH,HRH, Winda mara, Retail Pharmacy Outlets) with clinical placement detail required for the Education Provider to pay for student placements. This letter then be attached to an invoice and sent to the relevant Education Provider who would understand the placement location and the conditions under which the Portland Partnership works.

This system will be reviewed as needed.* + 1. PDH will invoice DWECH monthly for CPPC

costs @ $363.84 p.w inc GST (the equivalent of 8 hrs per week) for 64 weeks ( October 2012 to December 2013)* Manage the liaison with education providers
	+ Communicate with partners and education providers to achieve the best fit for student needs and placement setting
	+ Promote all partners, and the DWECH partnership for the attraction of students to the region
* DWECH Clinical Partnership Project Evaluation
	+ Collaborate with DWECH to establish systems for the collection of information to satisfy project evaluation and recommendations including information requests from the Department or Clinical Placement Network.
* Commit to reviewing drafted material and content for the community, student and clinical supervision resources relevant to PDH
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| 1. **Winda mara**
 | Student placement logisticsCultural Safety Education Clinical supervisionProject evaluation Community, Student l and Clinical Supervision Resources  | 6.1 Allocate staff time for one contact person to liaise with Winda mara placed students and the project’s Clinical Placement Co-ordinator6.2 Provide opportunities for students to attend cultural safety education at DWECH6.3 Work with DWECH to identify staff for clinical supervision training and mentoring* 6.4 DWECH Clinical Partnership Project Evaluation

Collaborate with DWECH to establish systems for the collection of information to satisfy project evaluation and recommendations including information requests from the Department or Clinical Placement Network6.5 Commit to reviewing drafted material and content relevant to Winda mara  |

# Dispute Resolution

The objective of Dispute Resolution is to achieve a result which is fair, non-discriminatory and equitable.

If the Steering Group is unable to resolve the issue, by a mutually agreed method an agreed process of mediation will be implemented and the cost shared equally by the partners.

# Term of the Agreement

The term of the agreement is from October 2012 to December 2013.

# Signatures

# Active Health

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# Dr. Marg Garde, Clinical Director date

# Dhauwurd Wurrung Elderly Community Health Service Inc

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# Ros Alexander, Chief Executive Officer date

# Heywood Rural Health

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# Fiona Heenan, Primary Care Manager date

# Portland District Health

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# Frank Megans, Director of Nursing date

# Winda Marra Aboriginal Co-operative

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# Michael Bell, Chief Executive Officer date

1. Best Practice Clinical Learning Environment Framework Implementation PHASE No. 1 March 2010.Darcy & Associates [↑](#footnote-ref-1)
2. The number and type of student’s to be placed is in accordance with the DWECH project submission to the Victorian Department of Health , see below. [↑](#footnote-ref-2)
3. **National Police Check**  (current on the 1st January every year of enrolment)

 **Working with Children Check (current, note this check lasts 5 years)**

 **Immunisation Certificate (** Hepatitis B & C ; Measles, Mumps and Rubella (MMR) Diphtheria, Polio, Tetanus and

 Pertussis (ADT) Tuberculosis (recent mantoux) Varicella (Chicken Pox) Annual Influenza vaccine [↑](#footnote-ref-3)