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| Final report Small Capital and Equipment Program  |

Preparing for our future

Date completed: 18 March 2013

Background and context

The primary aim of this project was to upgrade the information technology (IT) infrastructure for students undertaking their placements with Gateway Community Health (GCH) and Ovens and King Community Health (OKCH). Upgrading the infrastructure will not only enable both organisations to work more collaboratively to increase the number of student placements provided, but significantly increase the types of placements by the provision of multidisciplinary and cross-location and overall quality of all student placements within the region.

Project objectives and expected impacts

* Upgrade IT infrastructure for students undertaking clinical placements with GCH and OKCH.

Enable both organisations to work together to increase the number of students, types of placements and quality of placements provided.

Expected impact of this initiative is that the GCH and OKCH strategic alliance will now be in a stronger position to provide quality well-resourced multidisciplinary placements across the region.

Project activities

* OKCH and GCH to share placement data for 2012 and identify similarities and opportunities for cross-discipline/location placements.
* Purchase and install IT equipment.
* Adjust current evaluation mechanisms regarding clinical placements. Include section related to the new resources and facilities specific to students against the Best Practice Clinical Learning Environment internal monitoring indicators (BPCLE).
* Undertake an end of project review using results from BPCLE internal monitoring indicators to determine learner satisfaction.

Implement a combined GCH and OKCH clinical placement work plan for 2013–14

Project management

* The Clinical Manager at GCH and the Operations Manager at OKCH along with both site IT coordinators and a representative from HRHA met as an initial steering group to determine the identified needs and proposed process for implementing this initiative. Over a three-month period students at GCH were also consulted on their experiences and how and what could have improved this experience.

Timelines were delayed due to a series of unavoidable staff turnover and delays in the both the delivery of equipment and installation due to capital works occurring at 155 High Street Wodonga. The project was back on track by the end of November and development of an OKCH and GCH collaborative student placement program for 2013 is evolving.

Project performance against stated deliverables

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| Project activity | Project deliverable/target | Due date | Status |
| OKCH and GCH to share placement data for 2012 and identify placements that can be offered as cross-discipline and/or cross-location. | Clinical placement plan for placements occurring between June 2012 and March 2013. | November 2012  | Complete |
| Equipment purchase and installed. | * Equipment purchased and installed between July and November 2012
* Workstations set up and accessible to students
* A medical student consultation room is now available with new and appropriate equipment
* Supervision room for meeting with tertiary representatives, placement supervisors peers etc. is available for students
* A student training and chill-out room is available for peer work and chill-out space for students
 | 30 November 2012 | Complete |
| Current evaluation mechanisms regarding clinical placements at OKCH and GCH have sections added to them, in order to measure the addition of appropriate resources and facilities against BPCLE internal monitoring indicator: Learner satisfaction with respect to access to IT and internet within the health service.  | * Clinical placement evaluation mechanisms modified. Survey monkey adjusted and administer in final week of placement
* Data collated and reported back to the board quarterly on balanced score card
 | January 2013 | Complete |
| End project period review undertaken using results from BPCLE internal monitoring indicator learner satisfaction with respect to access to IT and internet within the health service regularly assessed and any resulting action need to be undertaken is completed (e.g., workstations need adjustment, any IT issues rectified). The report to provide feedback from students about the infrastructure facilities and feedback from staff about improvements to the quality of clinical placements in terms of providing IT and other infrastructure for clinical placements. | * Collate student feedback regarding placement location; facilities and multidisciplinary nature
* End of project report finalised
 | March 2013 | Complete |

Project outcomes

The tangible outcomes of this project have included:

* Equipment purchased and installed
* Workstations set up and accessible to students
* A medical student consultation room is now available with new and appropriate equipment
* Supervision room for meeting with tertiary representatives, placement supervisors peers etc. is available for students

A student training and chill-out room is available for peer work and chill-out space for students

Upgrading the OKCH and GCH student infrastructure through the rural Small Capital and Equipment Program has enabled a stronger alliance and collaboration in student placement procedures, policies, capacity and hence an obvious increase in available opportunities. In the last six months we have had a significant increase in the types of placements by the provision of multidisciplinary and cross-location and overall quality of all student placements within the region. Figures 1 and 2 show the discipline specific placements across both sites, the increase in some specific placement types and the overlap between organisations in specific disciplines.

The official opening of the new student facilities will be linked in with the official opening of the GCH Super Clinic. It is anticipated that the launch will involve the Health Minister, other department bodies, tertiary institutions, local NGO’s, the media and the community and therefore, a great opportunity to actively promote our new facilities and improved capacity to facilitate student placements. A tentative date on 29 April has been set but is subject to availability of some of the guests.

Figure 1: Student rates per discipline 2011–12

Figure 2: Student rates per discipline July – December 2012

Evaluation

At the commencement of 2013 the student evaluation survey was reviewed and updated to ensure both organisations were measuring and monitoring the whole of the student placement experience. To assist us to actually evaluate the students’ experiences, we used Survey Monkey as the medium to ask questions around the following topics: agency and role orientation, the role of the clinical educator, support and engagement with other staff, placement/clinical challenges, learning opportunities, skills acquired, learning environment and facilities, etc.

With the purchasing and implementation of student training and chill-out room; a specifically designated student supervision room and the medical student consultation room, both OKCH and GCH are now in a stronger position to increase their ability to take on more students as evidenced by table below.

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|  | OKCH | GCH |
| July 2011 – June 2012 | 295.5 days | 707 days |
| Average number of students per day | 295.5/365= 0.81 students/per day | 707/365= 1.9 students/day |
| July – December 2012 | 265 days | 576 days |
| Average number of students per day | 265/183 (six months)= 1.44 students/day | 576 days576/183 (six months)= 3.14 students/day |

Table compares the average number of students on placement over a twelve-month period (2011–12) with the past six months to observe an increase in placements offered.

The updated survey was only revised in January this year and to date we have only one student who has completed their placement and hence the evaluation process. Data will continue to be collected/collated and processes will be adapted and changed as feedback is received.

Conclusion

Placements offer students a unique opportunity to apply their classroom learning in real life situations under the supervision of qualified and experienced staff.

Undertaking placements within GCH and OKCH allows students to develop an understanding of the work we do, as well as the roles they may be most interested in pursuing in the future. Historically with limited number of resources and supports within our community health organisations, students have ‘had to’ be squeezed in as required. Now with specifically tailored spaces and facilities students have and will continue to have a sense of belonging and value which will inevitably support and encourage their learning on the job. It shall also promote the cross-fertilisation and interdisciplinary learning as they network regularly in their ‘own’ space.