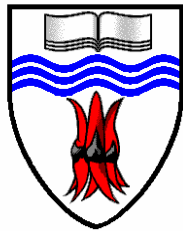


# Increasing the efficiency and impact of student placements

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# Reflection

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- Why do I take students?
    - Motivations
    - Benefits
    - Issues/challenges
  - Why do I not take students? (at all, as often as asked)
    - Reasons
    - Barriers
    - Fears
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# Increasing the efficiency & impact of student placements

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- ❑ Taking multiple students at one time
    - Pair senior/junior students
  - ❑ Getting organised ahead of the placement
  - ❑ What learning opportunities can I realistically offer here?
    - I'm only part-time; how can I have students?
    - This isn't a normal placement - I spend most of my time in the car
  - ❑ Building in 'down time' or admin/client time for you as the clinical educator
  - ❑ Working with other staff to share the load/get support
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# Taking multiple students

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- Benefits of taking more than 1 student at a time
    - Greater productivity for time invested
    - Bigger impact on client throughput and dept
    - Peer learning opportunities
      - Enhanced student learning outcomes
      - More time for you as CE
  - Costs in taking more than 1 student at a time
    - Space
    - Planning and organising time needed
    - Personality conflict between students
    - “Loss of control”: where are they?, what are they doing?
      - Ladyshefsky (1993)
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# Pairing junior/senior students

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- Senior level students are more productive and less time intensive than junior students
- Pairing allows you to offer multiple placements:
  - junior students can watch and discuss with seniors, assist with treatments (but not plan them), write drafts of reports, (often enough to achieve learning goals of early placements)
  - Senior students can provide 'teaching' and feedback to juniors on basic clinical skills development, requiring less CE time with junior
  - Senior students get to articulate their clinical reasoning, and practice skills in teaching and mentoring

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Rosenthal (1986)

# Getting organised ahead of the placement

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- **Teacher-as-manager model** (Romanini & Higgs, 1991)

- See handout
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# What learning opportunities can I realistically offer here?

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- I'm only part-time; how can I have students?
    - Split placements
      - Across 2 supervisors
      - Across 2 sites
    - Combine part-time 'clinical' placement with part-time 'project placement' (ie, broad learning goals about health care)
      - Uni Sydney, 1998
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# This isn't a normal placement

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- I spend most of my time in the car
  - I don't provide direct services to clients (I train others)
  - I only do assessments & plan programs, I don't treat
  - What is a 'normal placement'? Given the rapidly changing face of health care and models of service delivery
    - Perhaps your service/placement is what will be 'normal' by the time the student graduates?
    - Negotiate with the university re flexible learning expectations and assessment
    - Can you vary your normal routine to include some more traditional services (e.g., mainly assessments/consults but an intensive group program with hands-on treatment e.g., a falls group or stroke group top up program)
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# Building in 'down time' or admin/client time for you as the clinical educator

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- Easier if have multiple students -> peer learning activities
  - eg., go to ward and do (a safe) assessment, discuss, report back
  - eg., senior/junior student pairs save you time with junior students
- Timetable slots in day for student to review files, videos, resources, write reports, to free you up to do work only you can do
- Have set times for questions & discussion/feedback
  - Reduces interruptions and 'talk time' during the day

# Working with other staff to share the load/get support

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- Ask your colleagues to help you get organised ahead of time
  - What learning opportunities can they offer the student that you can't? -> timetable
- Share the load
  - Will these opportunities colleagues can offer also offer you some 'student free time'?
  - If you work in rehab and they in acute, can the student spend a morning a week with them?
  - Can the students spend a day a week in the health promotions unit working on a project?

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- Ask for mentoring or supervision from a more experienced clinical educator
    - Someone to offload to, problem solve with
  - Use team supervision of students
    - Share perspectives on student learning and development; get ideas to enrich student experience
    - Joint problem solving
    - Joint assessment of student performance (often the most stressful part of placements)
  - Ask the uni clinical coordinator to call you regularly so you can discuss how it's going.

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