



# Interprofessional Student Placement Supervisor Guide



Great state. Great opportunity.  
And a plan for the future.

**Queensland**  
Government

## Contents

WELCOME .....	3
STUDENT PLACEMENTS IN THE SUNSHINE COAST HOSPITAL AND HEALTH SERVICE .....	3
STUDENT PLACEMENT HUB CONTACT INFORMATION .....	4
STUDENT PLACEMENT: OVERVIEW OF ROLES AND RESPONSIBILITIES .....	4
THE STUDENT PLACEMENT .....	7
PERFORMANCE EXPECTATIONS .....	7
APPENDIX A: SUPERVISOR/ FACILITATOR PLACEMENT CHECKLIST .....	16
APPENDIX B: MENTORSHIP INFORMATION .....	17
APPENDIX C: SMART OUTCOMES FROM SUPERVISION .....	22
APPENDIX D: STUDENT SUPERVISION RECORD .....	23
APPENDIX E: FILE NOTE .....	24
APPENDIX F: CHECKLIST OF POTENTIAL FACTORS IMPACTING ON PLACEMENT .....	25
APPENDIX G: STUDENT PLACEMENT PERFORMANCE MANAGEMENT FLOWCHART .....	26
APPENDIX H: STUDENT LOCAL WORK UNIT INDUCTION CHECKLIST .....	27
APPENDIX I: SUPERVISOR/ FACILITATOR FREQUENTLY ASKED QUESTIONS .....	29
DEFINITIONS .....	30
REFERENCES .....	31

## WELCOME

Placement is an essential and fundamental component of undergraduate, vocational and post-graduate programs for health professionals. Many of these students regard their placement/s as a highlight of their education, and an essential component in transforming theoretical knowledge into essential practical skills.

We respect and value your contribution, knowledge, experience, and enthusiasm as a Supervisor. Your support of students during placement is essential to ensure excellence of future generations of health professionals. Imparting knowledge to others is also considered a professional responsibility by many disciplines and is a great opportunity to develop one's leadership skills.

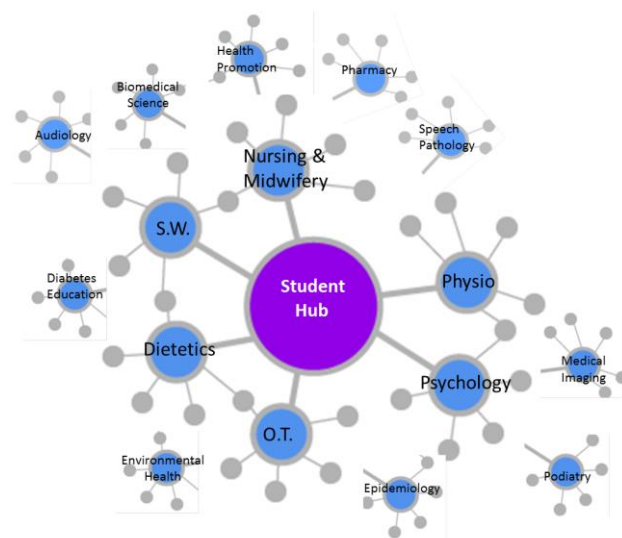
This guide has been prepared to assist you in the role of Supervisor. It contains a summary of general role requirements and clarifies Educational Providers' and Sunshine Coast Hospital and Health Service (SCHHS) expectations. It also provides information to inform and prepare you for some common issues that you may experience while facilitating student learning. Discipline specific information is available from the Education Provider. If you are uncertain about any aspects of the role, please seek clarification by contacting the Student Placement Hub contacts as listed in the manual.

We hope you will find the information helpful and wish you the very best during your Supervisor role.

## STUDENT PLACEMENTS IN THE SUNSHINE COAST HOSPITAL AND HEALTH SERVICE

Students undertaking placement at SCHHS are from a diverse range of disciplines, studying a range of courses/programs from a variety of Education Providers (e.g. Universities and TAFE). The Education Provider usually has established learning objectives and set periods of time which the student must undertake to meet the course/program requirements. The Health Service, as a member of the Sunshine Coast Health Institute, also has a legally binding agreement with Griffith University, University of the Sunshine Coast and TAFE Queensland, which requires any student placement capacity to be offered to these partners first. Accordingly, well-coordinated systems and processes are required to ensure that all parties' needs are met.

Health professional student placements offered throughout the SCHHS are delivered via a collaborative hub and spoke model. The intention of the Student Placement Hub team is to provide a centralised point of contact and support for health professional student placements which occur across the Hospital and Health Service, apart from medical students. The 'spokes' are the various discipline specific student placement representatives who occupy a variety of roles across the health service, including clinical educators, managers and senior clinicians. Together, the SCHHS hub and spoke model provides a robust, sustainable service to enable the education and training of future generations of the health care workforce.



## STUDENT PLACEMENT HUB CONTACT INFORMATION

For more information on the Student Placement Hub, expectations and support of placements, there is an online presentation on the LMS platform, named: Student Placement and the Role of the Student Placement Hub. This can be located using the 'search' function on LMS.

Jennifer Angel

Student Placement Hub Manager – [jennifer.angel@health.qld.gov.au](mailto:jennifer.angel@health.qld.gov.au)

Ph: (07) 5202 3110

Julia Stewart

Nurse Educator Undergraduate Placement Coordinator – [julia.stewart@health.qld.gov.au](mailto:julia.stewart@health.qld.gov.au)

Ph: (07) 5202 2986

Jenna Shaw

Allied Health Student Clinical Educator - [jenna.shaw@health.qld.gov.au](mailto:jenna.shaw@health.qld.gov.au)

Ph: (07) 5202 3084

Sabina Kirwan and Pauline Currell

Administration Officers – [sc.student.hub@health.qld.gov.au](mailto:sc.student.hub@health.qld.gov.au)

Ph: (07) 5202 3001/5202 2993

## STUDENT PLACEMENT: OVERVIEW OF ROLES AND RESPONSIBILITIES

In order to achieve desired outcomes and ensure that safety for patients, students and the workforce is maintained, collaborative governance and clear roles and responsibilities are essential amongst the key stakeholders, as outlined below.

### Supervisor

The Supervisor is a health professional who is appointed to support learning, supervise and evaluate students undertaking placement within SCHHS facilities. The quality of supervision makes a significant difference to the quality of safe patient care and is dependent on the establishment of an effective supervisory relationship / alliance. Supervision provides an ideal forum to promote a culture of lifelong learning.

The responsibilities of the Supervisor are to:

- Ensure that patient/consumer safety is always an over-riding consideration during the placement
- Act as a professional role model
- Facilitate the learning experiences including supervision, feedback and assessment
- Assess learning needs of the student/s
- Ensure they are familiar with the students' course requirements and expected outcomes
- Promote competence in clinical practice by:
  - Motivating and encouraging enthusiastic behaviour
  - Providing access to learning opportunities that meet clinical objectives
  - Promoting theory to practice links
- Demonstrate and supervise practice of skills
- Monitor theoretical and clinical progress on a regular basis

- Work in collaboration and cooperation with internal and external stakeholders to provide a quality student placement experience
- Ensure General Evacuation Instructions and Local Work Unit Induction are provided to the student/s
- Ensure all items on the [SCHHS Student Minimum Pre-placement Requirements](#) sheet have been completed and signed, and the sheet is sent to the Student Placement Hub via internal mail by second day of placement

### **Allied Health Clinical Educator**

- Advise on discipline-specific aspects of student placements
- Verify discipline-specific aspects of student performance issues
- Attend discipline-specific state-wide forums for staff education matters
- Facilitate discipline specific staff education

### **Discipline Contact Person**

- Act as the central point of contact regarding student placements for Education Providers, Health Service and State-wide placement coordinator (where applicable) of the discipline which they represent
- Ensure student placement offers are made according to the Priority of Allocation of Student Placement Capacity Work Instruction. Contact the Student Placement Hub for more details
- Identify appropriate placement locations and Supervisor for placement/s;
- Liaise with Supervisor regarding pre-placement preparation and supervision training.
- Support the Supervisor and assist in performance management
- Ensure student details are correctly entered into Student Placement database (required for LMS access, proximity card) etc 3 weeks before placement
- Identify any discipline specific pre-placement requirements (where applicable) in addition to the [SCHHS Student Minimum Pre-placement Requirements](#), and communicate with Education Provider
- Assist with management of student performance issues

### **Education Provider (e.g. University or TAFE)**

- Ensure that students are suitable for placement i.e. physical and mental capacity is suitable to perform relevant duties and the student has appropriate theoretical knowledge
- Liaise with Discipline Contact Person regarding coordination of student placements as appropriate
- Distribute [SCHHS Student Minimum Pre-placement Requirements](#) to students
- Review and maintain evidence of completion of student's pre-placement requirements
- Provide assessment documentation, standards and process for placement assessment
- Advise and assist with any knowledge or learning deficit issues
- Guide and direct the progress of student performance management issues in collaboration with others

### **Operational/Line Manager**

- Assist in the identification of student placement capacity and Supervisors
- Provide a safe work environment which is conducive to the safety and wellbeing of students allocated to the area
- Provide leadership and support of staff engaged as Student Supervisors
- Support continuing professional development of staff to act in the role of Student Supervisors

### **Student**

- Complete pre-placement requirements as outlined in the [SCHHS Student Minimum Pre-placement Requirements](#), and provide evidence to Education Provider
- Adhere to scope of practice relevant for discipline and year of study
- Ensure patient confidentiality
- Comply with Queensland Health/SCHHS policies and procedures
- Demonstrate a professional standard of behaviour in accordance with the Queensland Health Code of Conduct, as well as Education Providers' expectations
- Demonstrate a professional standard of dress – wearing Education Providers' uniform in accordance with the policy (unless requested otherwise)
- Ensure that clothes, jewellery, hair and appearance complies with all Education Provider and SCHHS policies
- Student name badge is worn at all times

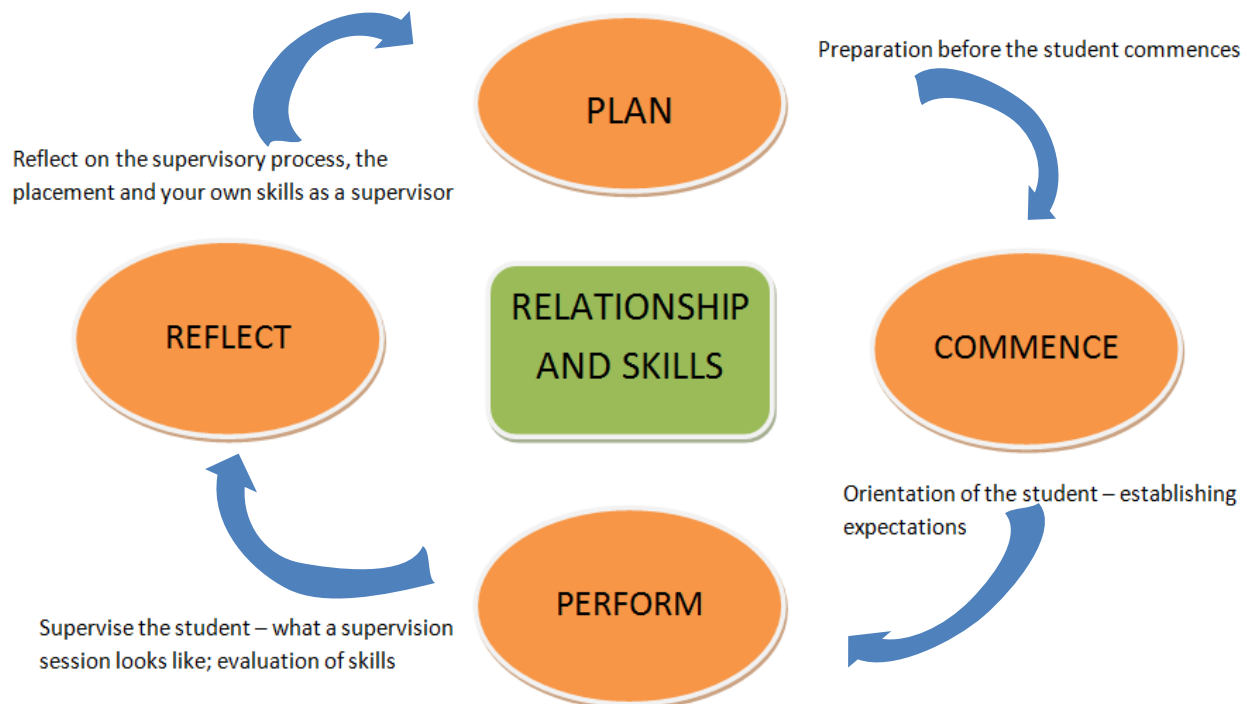
### **Student Placement Hub**

- Support Student Supervisors in their role
- Enable onboarding of placement students via centralised processes (e.g. proximity cards, pre-placement requirements)
- Provide student placement governance, evaluation and SCHHS reporting requirements
- Work in collaboration with Education Providers to manage placement requests
- Management of student placement issues as required
- Strategic level engagement with Education Providers
- Development of appropriate contracts (student schedules)
- Evaluation and audit of student placement outcomes
- Provision of [SCHHS Student Minimum Pre-placement Requirements](#) to Education Providers and outline obligations
- Oversight of assessment standards for placement – nursing only

## THE STUDENT PLACEMENT

There are several phases of the student placement as outlined in the diagram below:

- Planning and preparation of Supervisor and resources
- Commencement
- Supporting performance
- Reflection



Essential to all four of these phases of the placement are the Student Supervisor's communication and professional skills. Together, these components should be considered as a continual quality improvement cycle, which enables the Supervisor to continually enhance and improve the student placement experience.

Key tasks required of the Supervisor to be completed during each phase are outlined in APPENDIX A: SUPERVISOR SUPERVISOR STUDENT PLACEMENT CHECKLIST

Being an effective Supervisor during each of these phases requires additional skills, confidence and competence. In order to develop these, it is recommended that you:

- Undertake [relevant face to face or on-line training](#)
- Seek a mentor who you can seek regular guidance from. See APPENDIX B: MENTORSHIP INFORMATION

## PERFORMANCE EXPECTATIONS

### Absence from Placement

Students are to directly notify their Supervisor and Education Provider of any planned or emergent leave whilst on placement. Students who are absent from placement may be required to make up the time in order to successfully complete the requirements of the course/program. If the Supervisor

needs to take emergent leave they should advise their Line Manager and the Discipline Contact Person. It is preferable that a replacement Supervisor be identified by the team in which the student is placed.

### **Assessment**

Each Education Provider (University/TAFE) will provide assessment tools and resources aligned to the legislative requirements of the program to assess a student's competence. Assessment focuses on the whole of the student's performance, that is, the extent to which each criterion/learning objective has been met overall for the placement. Its purpose is to rate the level of achievement reached on completion of the placement. Please make yourself familiar with the individual Education Provider assessment tool and discuss further with the Education Provider or Discipline Contact Person as required. It is the responsibility of the Supervisor to provide feedback on the student's performance, not to pass/fail the student. The final placement grading is determined by the Education Provider.

### **Communication**

Effective interpersonal communication skills are essential to a successful student placement experience. Adopting a non-threatening approach, being flexible, open minded, having a sense of humour and a self-confident attitude will assist greatly. Additional tips which should be considered are:

- Listen first
- Use "I" statements – "I think"... "I feel"
- Refrain from judgement, blame, or denial of responsibility
- Separate FACTS from OPINIONS
- Be aware of emotions
- Be aware of needs and values
- Ask what they would like or need
- Be conscience of body language
- Take into account cultural differences

Face to face conversations are essential for ensuring appropriate rapport is achieved between the student and the supervisor. There are several principles that can be utilised to ensure that this is as successful as possible. A resource available through QHEPS which may be helpful is ["Giving Constructive Feedback: The 60 Second Conversation"](#)

### **Complaint Resolution**

Complaints raised (e.g. by a student or Education Provider) should be managed via the [SCHHS Complaint Resolution process](#). Steps include:

- Defining the specific complaint details including people involved.
- Focus on prompt resolution
- Ensure natural justice and confidentiality is applied
- Keep accurate file notes including chronology of events

### **Facilitating Learning**

Student placements present learning opportunities which are very different from classroom-based learning, allowing students to have first-hand experience of real-life situations. Within this environment



it is valuable if Supervisors use varied ways to engage the student in learning, within operational constraints. Students need to make the most of the opportunity to learn on placement. For the student, reflection may increase their awareness of their preferred methods of learning and opportunity to move beyond this.

Below are a range of teaching and learning methods which the supervisor may wish to use to present information to a student, and to assist them with their learning:

- Give opportunity to think about the task or learning first before trying it
- Allow time for students to work alone as appropriate
- Allow time for discussion and problem solving
- Encourage students to review information/case and think of possible questions and applications about the information or clinical case
- Allow students to try something first (within their scope of practice) and then reflect later
- Try to present the facts of the situation or case
- Provide students with interpretations about what they are seeing or doing
- Talk about the reasons and evidence behind the task/information
- Ask the student to use the interpretations you have provided in the clinical environment and to consider theories they know of to explain information
- Use pictures, diagrams, flow charts, timelines, films, photos, concept maps to aid learning
- Use written and spoken information to assist with learning
- Provide practical demonstrations or opportunity to practice themselves
- Encourage students to write summaries or outlines of information or clients
- Encourage group and peer learning as a forum to discuss cases and hear other ideas
- Outline information in a logical order/steps
- Use clinical case studies to assist learning
- Encourage students to think about the logical order or steps in the task and what things might need to come next in a task. I.e. What should we do next with that client?
- Relate the current learning experience with the past experience

There are several resources that may assist facilitation of learning:

- [Effective Questioning- Rolfe's Reflective Model](#)
- [Reflective Practice Coaching Tool](#)
- See APPENDIX C - Smart Outcomes From Supervision
- See APPENDIX D - Student Supervision Record
- See APPENDIX E - File Note
- See APPENDIX F – Checklist of Potential Factors Impacting on Placement

### Home Visits

A student should only undertake a home visit to a patient/consumer if accompanied by a supervisor (or delegate). This is to ensure:

- appropriate care is provided to the patient/consumer.
- appropriate supervision is available for the student, to facilitate achievement of learning outcomes and safety.

Staff and/ or students must undertake a risk assessment prior to visiting a patient at home or at a

community health centre. Where a risk is identified, students and staff must take steps to mitigate the risk. For more information see the [Staff personal safety, General Health and Community Services Procedure](#)

### Identification

A photo identification badge (issued by the Education Provider) is to be visibly worn by the student at all times. It should be made clear, when introducing the student to other members of the workforce, patients and consumers that they are a student.

### ieMR

A student profile ieMR access is available, if the area Line Manager agrees that the access is appropriate and approves the Novell cost to be incurred by their cost centre. Generally, this should be reserved for students in their final year of study. Placement students are only to be provided ieMR access if the student:

- Placement is at an ieMR facility and is longer than 10 days
- Has provided the Supervisor with evidence of completion of the appropriate eLearning module (e.g. Allied Health student ieMR eLearning)
- Is provided ieMR access under the role of student

Novell usernames and passwords remain confidential and should only be disclosed to the individual student. A workplace instruction is available from the Student Placement Hub to guide the supervisor in how to set this up.

Instructions on student ieMR documentation and Supervisor sign off are available on the [SCHHS ieMR Quick Reference Guide](#) portal by searching under “student”.

### Incident Management

If a student is involved in an incident, the following steps are to be followed:

1. Supervisor follow steps as outlined in the [SCHHS Incident and hazard management, Work Health and Safety Procedure](#) including:
  - a. Take all necessary steps to provide first aid, medical assistance/call code
  - b. If safe to do so, take actions to make the workplace safe
  - c. Notify relevant manager of the area
  - d. Complete the [Riskman](#) online worker incident entry report by the end of the working shift of the incident occurring or as soon as reasonably practicable.
2. Supervisor emails a PDF copy of the Riskman report to the Student Hub (Nurse Educator/ Allied Health Student Educator/ Manager as appropriate for discipline) and the Education Provider contact person.
3. The Education Provider may also have their own process that needs to be followed (eg. completion of form online). CF/Supervisor supports the student to complete.
4. Supervisor follows up with the student post incident to ensure that student is safe and fit to remain on placement. Outcome of this follow up is added to Riskman report and emailed to Student Hub (Nurse Educator/ Allied Health Student Educator/ Manager as appropriate for discipline).

If a student is involved in any type of incident, the details must be entered onto RiskMan by the supervisor. A root cause analysis, risk management and follow up of the case is to be provided by the Line Manager of the area.

RiskMan enables the SCHHS to collect, integrate, manage and report on:

- Consumer feedback (compliments and complaints)
- Incidents: clinical and non-clinical (staff, hazard, equipment)
- Case management (staff rehabilitation)
- Risk management

There is online training available through the [LMS platform](#) and a [training manual](#) located on QHEPS.

### **Intellectual property considerations and allied health students on placement**

Students can only own the Intellectual Property Rights of material if it has been created by the student:

- For the sole purpose of assessment
- Without any consultation or input from HHS employees (e.g. staff supervising students)
- Without basing it on existing Queensland Health material and
- Without the assistance of Queensland Government funding

Otherwise the Intellectual Property Rights will lie with the Department. For more information please refer to [Intellectual property considerations and allied health students on placement](#).

### **Patient Records**

SCHHS places very high importance on maintaining patient confidentiality and protecting privacy.

Patient trust is critical to providing high quality care. Students who have access to identifying information need to be familiar with the relevant confidentiality and privacy requirements outlined below:

- Personal information is provided by patients on the understanding that it will not be mishandled or inappropriately disclosed. Students working within SCHHS are bound by the Health Services policies and procedures
- Under no circumstance is a student allowed to access information relating to her/himself without going through the correct channels
- Authorisation for access to health records for teaching or study purposes must be obtained from the relevant Director or department manager. This authorisation must accompany a written application which should be forwarded to the Clinical Information Access unit on 5202 3011.

For more information please refer to the Patient Information, access and handling for privacy and confidentiality procedure

### **Performance Management**

SCHHS is committed to quality client care, based on holistic professional practice models. It is the SCHHS's responsibility to ensure safety to practice and caring professional behaviour are demonstrated by all students while on placement. It is therefore important to have a structured, objective system in place to manage any questionable situations that arise with students. If a student's performance is below the expected level, the Supervisor is encouraged to consider and discuss with

the student factors which could be impeding performance. See APPENDIX H - Checklist of Potential Factors Impacting on Placement.

Examples of low, medium and high-risk student placement performance issues are listed below.

Low Risk	Medium Risk	High Risk
<ul style="list-style-type: none"> <li>• Poor punctuality</li> <li>• Failure to respond to direction that does not lead to a risk or risk serious consequence</li> <li>• Inappropriate communication with others that does not lead to or risk serious consequence</li> <li>• Health matters of minor risk, temporary in nature or an existing condition that is well managed</li> <li>• Student feels there is inadequate support or communication from Supervisor</li> </ul>	<ul style="list-style-type: none"> <li>• Repetition of previous low risk behaviour or low risk behaviour that was not resolved within agreed time frame</li> <li>• Delivering sub-optimal care not resulting in patient harm</li> <li>• The amount of direct support required from supervisor results in loss of clinical care of a full shift/day (excluding student's orientation day)</li> <li>• Reputation of Health Service negatively affected in a minor manner for example, a patient complaint without media involvement</li> </ul>	<ul style="list-style-type: none"> <li>• Serious violations of health and safety practices (e.g. non-compliance with infection control protocols)</li> <li>• Serious failure to demonstrate proficiency in applied professional practice skills and competencies to the standard and safety level expected of a student at their level of training</li> <li>• Serious health issue or impairment rendering student unable to complete majority of tasks required of placement</li> <li>• Repeated inappropriate support for student or inappropriate conduct of Supervisor</li> </ul>

The Student Placement Performance Management Flowchart (see APPENDIX G) has been developed to guide the clinical Supervisor's response to performance issues.

The purpose of this process is to:

- Ensure safety for patients, students and staff
- Maintain an objective standard
- Identify unprofessional, unsafe, and unsatisfactory behaviours warranting intervention
- Enable achievement of required learning outcomes

A learning management plan/contract is a document that allows you to provide the student with written feedback addressing your concerns regarding the student's knowledge, skill or attitude. The learning management plan/contract should link the unsatisfactory standard of performance/behaviour with their professional standards/domains. The development of a learning management plan/contract provides an opportunity to discuss the learning need and/or strategies to improve/enhance student performance.

### Providing Feedback

Feedback needs to be provided to enable individuals to achieve/assess their professional and personal goals, protect their self-esteem and help create and consolidate learning. Without effective

and appropriate feedback, students will have little or no knowledge of their performance and progress. Feedback is therefore an essential communication tool between the supervisor and the student. The student is also encouraged to seek feedback from other staff.

There are several general principles for providing feedback:

- Compare the student's performance against the required standard (see relevant assessment tool for the student)
- Be precise i.e. identify specific performance/behaviours that you are addressing
- Timely - the feedback should be given at an appropriate time for the student and as soon as possible after the behaviour/incident is observed
- Constructive - if providing negative feedback, identify the desired outcomes and explore strategies for improvement with the student. Identify a plan for the student to achieve these goals
- Motivate - acknowledge progress that the student has made, or is making towards achieving learning goals
- Regular - provide progressive formal/informal feedback throughout the placement
- Provide opportunities for the student to be re-assessed

For more information regarding feedback, please review the online training programs available from the Student Placement Hub [website](#).

On occasion you will encounter a student that will require feedback for either unacceptable or substandard behaviour/practice, e.g. insight into their behaviour, clinical practice, time management, social skills. It is important to obtain all available information from the student and the staff prior to addressing the issue/situation. Addressing the matter of concern as soon as possible allows the student the opportunity to rectify the issue. See Performance Management section of this document for more information.

### **Research and Quality Improvement Projects**

There may be times when a student requests to be involved in research, which may require additional governance and approval to standard clinical placements. Prior to enabling this, the Supervisor should contact the SCHHS Research Governance and Development Unit [SC-Research-Support@health.qld.gov.au](mailto:SC-Research-Support@health.qld.gov.au) and the team will help you navigate this process.

### **SCHHS Vehicles**

Students are permitted to drive SCHHS vehicles when all of the following criteria are met:

- The clinical area requires the student to drive
- The student holds a valid driver's licence and displays appropriate plates if required
- Authorisation has been obtained from the relevant operational/line manager
- They comply with the requirements as outlined in the [SCHHS Fleet vehicle usage procedure](#)

### **Student Clinical Education Allowance Claim Health Practitioners**

Health Practitioners who supervise students may be eligible for a daily supervision allowance. Submission of this form is now via myHR, under the 'submit form' tab. The completed and signed form needs to be uploaded by the Supervisor by following the prompts.

## Student Privacy and Confidentiality

Students have the right to privacy and confidentiality. This ensures that everyone is given a fair chance to succeed and that others' views towards them are not biased by what they have heard. Below are some examples of how confidentiality can be breached and recommendations concerning how to approach these situations:

- Learning goals should be kept private and shared only with the people who can assist the Supervisor or student with working towards these
- Some students return for a second placement within the SCHHS. Each placement should be viewed separately and the student's potential for success should not be affected by previous experiences within the SCHHS
- The supervisor and other staff should avoid making comparisons between students
- When a student's progress is being discussed, every effort should be made to include the student in the discussion. This promotes an open relationship where the student can be involved in evaluating their own performance and developing strategies to improve

## Student Safety – TAKE 5

This initiative is to support students that are on placement with in the SCHHS who need to stop, step away and take time to reflect on some of the following to ensure safe practice, patient safety and their own wellbeing.

### 1. *Patient safety*

Patient safety is the prevention of harm to patients through care delivery that

- Prevents errors
- Learns from the errors that do occur
- Culture of safety that involves patients, health care professionals, students and the organisation

### 2. *Scope of Practice*

At all times, student nurses should demonstrate that they have the knowledge, skills and abilities necessary to perform a specific task/nursing intervention. Student nurses must also adhere to their education providers scope of practice, and should there be discrepancy, the lesser scope should be followed. It is the student nurse's responsibility to be accountable for their actions and ensure they are working within the appropriate scope of practice.

### 3. *Seek Clarification*

In communication, clarification involves offering back to the buddy/preceptor the essential meaning, as understood by the student, of what they have just said. Thereby checking that the students understanding is correct and resolving any areas of confusion or misunderstanding leading to unsafe practice.

### 4. *Wellbeing*

Is the state of being comfortable, healthy and happy. We want to focus on the four dimensions of wellbeing to support students whilst on placement– mental, social, financial and physical for students.

## Student Safety



Stop, step away, take time.



## 5. Communication

The importance of communication in providing safe and quality healthcare is evident from research and clinical practice. This is a key element that students should feel empowered to deliver in a safe manner that is supported by their buddy/preceptor.

### Social Media

Use of social media in the work place is often problematic and should be avoided. Any communication must protect confidentiality and abide by the SCHHS code of conduct. More details are available on the [Social media in the workplace guideline](#)

### Uniform - Professional Appearance

Unless requested otherwise, students are required to wear the clinical uniform as advised by their Education Provider at all times when completing placement unless requested otherwise. The uniform must always be worn in a professional manner i.e. clean, neat and tidy. Consideration should be given to appropriate footwear, the amount and type of jewellery worn, and how hair is worn. The SCHHS has a 'closed shoe' and 'bare below the elbow' policy to reduce the spread of infection; this means no jewellery and no false nails or nail polish. Please refer to [Uniforms, dress standards and personal presentation procedure](#) for more in-depth information as required.

### Wellbeing

Being on placement can be a particularly stressful time for students, who are often also managing family and work commitments. If your student requires additional support, generic tools, learning modules and resources are available at [Queensland Health Allied Health Student Health and Wellbeing Resources](#) and [Beyond Blue "thedesk"](#). The [University of the Sunshine Coast Health and Wellbeing Service](#) has some great resources for managing stress, overcoming challenges, getting enough sleep and more.

If additional support is required whilst on placement, the student should be referred to the Student Services Centre available at their university:

University	Link
Australian Catholic University	<a href="http://students.acu.edu.au/services">http://students.acu.edu.au/services</a>
Bond University	<a href="https://bond.edu.au/current-students/services-support">https://bond.edu.au/current-students/services-support</a>
Central Queensland University	<a href="https://www.cqu.edu.au/student-life/new-students/student-support">https://www.cqu.edu.au/student-life/new-students/student-support</a>
Griffith University	<a href="http://www.griffith.edu.au/students/support">http://www.griffith.edu.au/students/support</a>
James Cook University	<a href="https://www.jcu.edu.au/students/support/student-support">https://www.jcu.edu.au/students/support/student-support</a>
Queensland University of Technology	<a href="http://www.student.qut.edu.au/services-and-facilities">http://www.student.qut.edu.au/services-and-facilities</a>
Southern Cross University	<a href="http://www.scu.edu.au/students/index.php/34">http://www.scu.edu.au/students/index.php/34</a>
University of Queensland	<a href="http://www.uq.edu.au/student-services/">http://www.uq.edu.au/student-services/</a>
University of Southern Queensland	<a href="http://www.usq.edu.au/current-students/services">http://www.usq.edu.au/current-students/services</a>
University of the Sunshine Coast	<a href="http://www.usc.edu.au/study/support-and-services/health-and-wellbeing">http://www.usc.edu.au/study/support-and-services/health-and-wellbeing</a>

## APPENDIX A: SUPERVISOR PLACEMENT CHECKLIST

TASK	
<b>Plan</b>	
3-6 months prior to student placement undertake <a href="#">relevant face to face or on-line training</a>	
Consider finding a mentor who currently supervises/facilitate students to support you on this journey – for more information concerning mentorship see Appendix B	
Work-shadow an experienced Supervisor: <ul style="list-style-type: none"> <li>• Providing feedback to a student,</li> <li>• Using the discipline specific assessment forms and/or tools</li> <li>• Planning for their upcoming student placement</li> </ul>	
Take a student for at least one day, with the experienced supervisor supporting you	
Attend one to one session with Discipline Contact Person/Allied Health Clinical Educator (where applicable)	
Make sure you are comfortable taking on this role, discuss this with your Line Manager and/or Student Placement Hub Educators if you have any concerns regarding the role	
Review learning objectives and assessment requirements of the student and discuss with the University/TAFE as required	
Prepare for your student's local induction to the workplace. See Appendix H along with components of the staff induction checklist relevant for the area of placement	
Prepare an orientation pack for the student/s to the work area. This may contain an overview of the service, rosters, relevant phone numbers and clinical documentation	
<b>Commence</b>	
Complete local work unit induction (see Appendix H)	
Encourage practice of using equipment relevant to their scope of practice	
Introduce student to the team, patients and consumers ensuring that you clearly identify them as a student, their discipline and level of training	
<b>Perform</b>	
Review basic care principles for patients as there may be a lag between lectures and placements	
Directly observe all clinical skills the first time the student undertakes them to ensure safe practice	
Be responsible for the care of clients seen by the student and countersign/ authenticate student notes	
Be a positive role model, approachable and available for questions, encouraging students to take advantage of learning opportunities	
Give timely clear and constructive feedback informally, as well as formally during supervision sessions	
Allocate appropriate time regularly for supervision	
Provide a graded approach to skill development, allowing time for observation, reflection and where appropriate, independent completion of tasks	
<b>Reflect</b>	
Invite student feedback	
Complete and send assessment form and any other relevant information to Education Provider	
Destroy any personal student information (e.g. student contact information and documentation)	
Discuss with the Student Placement Hub or your Discipline Contact Person any issues or feedback concerning the placement	
Reflect on placement and implement any identified strategies for future placements including further education requirements	



## APPENDIX B: MENTORSHIP INFORMATION

**A WISE MAN LEARNS BY THE EXPERIENCES OF OTHERS  
AN ORDINARY MAN LEARNS BY HIS OWN EXPERIENCE  
A FOOL LEARNS BY NOBODY'S EXPERIENCE**

The goal of mentoring in health is to retain health professionals in active practice, facilitate recruitment, increase professional skills, help structure the profession and increase satisfaction. When clinicians support each other, the profession enhances its power to control its own practice and destiny. The purpose of this information is to provide supervisors with information and resources needed to develop mentor relationships.

### Learning Objectives:

- Clarify the definition and attributes of a mentor relationship
- Explain the stages of the mentor relationship
- Identify the responsibilities and benefits inherent in a mentor relationship
- Describe the activities of a mentor, relationship
- Identify responses for evaluation of the mentor relationship

### Benefits of Mentoring

A mentorship program should benefit all parties, the mentee, the mentor and the organisation.

#### *What can I get out of being a mentee?*

- Gain a better understanding of how the work place operates
- Receive support, encouragement and feedback
- Develop interpersonal skills
- Gain knowledge about the role in which you are working
- Receive help with clarifying career goals and career pathways
- Gain opportunities to widen professional networks and reduce professional isolation

#### *What can I get from being a mentor?*

- Share one's wisdom and experience
- Gain a sense of personal satisfaction
- Develop interpersonal skills
- Gain experience in a new role
- Widen professional network and reduce professional isolation
- Be recognised for contribution to colleagues and to the workplace as a mentor

#### *What can the organisation get from a mentoring program?*

- Increases professional development and organisational capacity
- Enhances organisational culture and image
- Recognises values of individual contributions
- Increases ability to attract and retain people
- Seen as a leadership organisation
- Provides support networks
- Retains corporate knowledge

## Characteristics

Not everyone is suited to being a mentor and not everyone wants to commit to a mentor-mentee relationship. Whether you are looking for a mentor or have been asked to become a mentor, these characteristics should be considered as they facilitate a positive mentor-mentee relationship.

- **Patience:** It takes time to learn and it takes time to teach. The mentor should not take over a task because it is quicker or easier, this leads to frustration and dependence. The mentee should also expect to make mistakes and practice to perfect certain skills. Mentoring is about allowing time for the mentee to formulate the answers or solutions and not obtain easy answers.
- **Enthusiasm:** Mentoring requires work on the part of both parties and a substantial amount of energy, time and thought is required for success. Without enthusiasm the energy, time and thought are not applied and success is minimal.
- **Knowledge and skills:** The knowledge required is both clinical skills based and organisation based. Knowing the appropriate channels, resources and procedures is important, as is correct clinical performance. The ability to communicate effectively and teach at an appropriate level is required. Knowing and performing a skill and teaching it are two separate skills.
- **Sense of humour:** Learning new skills and developing in new areas is often stressful, and the ability to laugh at the situation and ourselves often makes a world of difference. A mentor and mentee should be sensitive not to laugh at each other, but be able to share a joke or situation.
- **Respect:** Respect of each other is necessary to foster a learning environment. You will also find a good mentor will have the respect of their colleagues due to their knowledge, willingness to share and flexibility.

## The Process

There are no set rules in how the relationship should be structured or what process the learning takes, but an organised approach gives both the mentor and mentee clear guidelines.

One approach is using the **three R's: Reflecting, Reframing and Resolving**. This process is based on Knowle's theories and Kolb's adult learning models. These theories revolve around experience, reflection on that experience and application into your practice.

## Reflection

Reflection is the creation of the relationship and setting the objectives and boundaries of that relationship. The mentor and mentee share information on a professional and personal level. Trust and rapport are built with the sharing of information and experiences.

Boundaries and ground rules are also established during the reflection stage. Issues such as confidentiality, time commitments, how often to meet and communication are discussed. The mentee reflects on their objectives and what they want to achieve out of the relationship. The mentor uses active listening and open-ended questions to clarify aims and goals without interfering and telling the mentee what to do and what to focus on. This is a non-judgmental and open communication time where the mentee can explore their strengths and weaknesses.

## Reframing

Reframing is the stage where the mentor gives constructive feedback, advice and demonstrations, and identifies ongoing strengths and weaknesses. Positive and negative experiences are discussed and evaluated. The mentor sharing some of their own positive and negative experiences is a helpful

way to give relief from some of the embarrassment and self-doubt. It also opens the door for more relaxed and open communication.

The mentor's role here includes teacher, adviser, supporter and sounding board. Other resources and people may be useful to aid in addressing issues. Discovering and using all resources before you is a valuable tool to learn.

### **Resolving**

This step involves creation of the action plan. Examine the options and the consequences of those options. The mentee needs to begin to formulate their own answers and commence independent problem solving. The mentor must be supportive of this and accept differences of opinion. The mentor can encourage new ways of thinking and assist with thinking outside the circle when evaluating the outcomes or solutions decided on. Self-confidence should be evolving and independence growing. The mentor moves away to the role of consultant, being needed less often and less closely.

### **For the Mentee**

When considering entering into a mentoring relationship work through these questions to narrow down your needs.

1. Are you looking for once-off advice, career coaching, goal clarity or a friend?
2. Do you want to broaden your experience in a particular field?
3. Do you need support for study as well as practical experience?
4. Do you want to know how to work your way up to a position similar to the one your prospective mentor holds? Are you looking for advice on how to get there?
5. Do you need help in obtaining extra time or a placement in a particular field or area?

Hints:

- Do not be afraid to approach your role model and explain what you are looking for. Most people are pleased to be approached and it is the first step in establishing whether they are interested or not.
- Show enthusiasm and initiative, as this will set you apart from the others.
- Be honest with your prospective mentor on what you need from them so that they know what is expected.
- Do not expect too much. Your mentor is there to guide you, not to do all the hard work. Listen to their suggestions and act on them.
- Always show your appreciation – your enthusiasm should show your mentor that what they are doing is worthwhile.
- Keep focused and do not lose sight of your objective, you will eventually get there.
- Believe in yourself.

### **For the Mentor**

Mentoring is sometimes confused with managing, coaching, or preceptoring. Mentoring extends beyond these concepts. Mentoring is a fundamental form of human development where one person invests time, energy, and personal knowledge to assist another person in their growth and development. Mentoring helps us to “be all that we can be”.

Hints:

- Networking. Assist the Mentee to form relationships within the work environment and within the organisation, so that they have others to lean on when you are not available.

- Keep a clear insight as to what the Mentee wishes to achieve. Achieve it and then move on to evolving the objectives.
  - Time is the key. Time to get to know and understand the Mentee, develop skills, learn new thought processes and allow the Mentee to discover answers for themselves.
  - Be sensitive to cultural or individual needs.
  - Give effective feedback, which is specific, factual and timely . Direct the discussion to the skills and behaviours not the person.
  - Provide the opportunity for the Mentee to evaluate their own behaviours, skills and feelings. Sit back and listen and allow them to reflect and plan the next course of action.
  - Challenge the Mentee in a non-threatening way to excel and move beyond their expectations. Support them, but ask the hard questions.
  - Be careful not to transfer personal feelings about the organisation or staff on to the Mentee.
  - Enthusiasm breeds and positive attitudes are contagious.
  - Debrief and evaluate progress often.
- Remember a Mentor / Mentee relationship may be initiated by either party. Some potential Mentees may not recognise their own need or the benefits which could be gained.

### The Mentoring Steps

1. Creation of rapport - this foundation will affect the whole relationship.
2. Vaguely formulate the objectives. Discuss in very general terms:
  - a) What you hope to achieve (purpose)
  - b) What activities you will do to achieve this outcome (strategies or process)
  - c) When, where and how often you will meet (logistics or methods).

It's too early to make any firm decisions about goals, as you haven't had time to assess the current situation, but you can probably make some agreements on the process and methods, and find out enough about the other person to decide whether or not you want to continue with the mentoring relationship.
3. Assess the 'here and now'- the mentee's point of departure. This defines the parameters of the mentoring relationship, and should be set by both the mentor and the mentee, with the mentees providing a self-assessment of their current situation. It is useful if the mentee has done some preparation which can be discussed at this stage e.g. the NICE analysis (see next page).
4. Decide on the 'there and then' i.e. the mentor helps the mentee to set objectives and decide on an end point (in terms of outcome and time frame).
5. Choose a way of getting from the 'here and now' to the 'there and then'- discuss options, and turn these into the action plan. Some of the factors to be considered are:
  - a) What are the mentee's developmental needs, and preferred learning style?
  - b) What support is needed and available, and how and when can it be accessed?
  - c) What are the obstacles?
  - d) What is the mentee's level of certainty that the plan will be implemented?
  - e) How can this be increased?
6. Do it - the mentee implements the plan, with assistance from the mentor when requested e.g. by enhancing focus on and observation of relevant factors, giving coaching and feedback.
7. Assess the progress. The mentor helps the mentee to overcome obstacles to success, helps decide whether goals need fine tuning or the method of achieving them needs adapting.

## The Contract

The following is intended as guidelines to assist with setting up a contract between mentor/mentee. The process of writing, clarification and agreement on goals and expectation has proven to be one of the most valuable tools for helping the mentoring relationship.

MENTEE NAME:	
MENTOR NAME:	
WORK LOCATION:	
AGREED GUIDELINES:	Meeting intervals:
	Communication types:
	After hours limits:
OBJECTIVES:	
ACTION PLAN:	
RESOURCES:	
EXPECTED TIME FRAME:	
REVIEW DATES:	
EVALUATION CRITERIA	
MENTEE SIGNATURE:	
MENTOR SIGNATURE:	

## APPENDIX C: SMART OUTCOMES FROM SUPERVISION

<b>Specific</b>	What exactly do you want to achieve? SMART objectives should be clearly identifiable and should consider who, what, why, when and where?		
<b>Measurable</b>	Is the objective measurable? If not, how will you know you have achieved your objective? If yes, how will it be evaluated? What will you measure? Helpful verbs for learning objectives: Assign, Apply, Define, Describe, Demonstrate, Develop, Inform, Evaluate, Investigate, Participate, Present.		
<b>Achievable Action-orientated</b>	Is your learning objective achievable? Do you have the necessary resources? What are you going to do? What strategies will you implement? What will be the outcome?		
<b>Relevant Realistic</b>	Is the objective relevant to achieving the shared purpose? Can the objective be achieved in the timeframe with the available resources?		
<b>Time-based</b>	What is the timeframe? How long will the objective take to achieve? What will be done, by whom, by when?		
<b>Teaching Methods</b>			
<ul style="list-style-type: none"> <li>• What is the best method for teaching this learning requirement?</li> <li>• Choose from one or a combination of: demonstration, observation, presentation, simulation, internet resources, self-Reflection</li> </ul>			
<b>Smart Goal(s)</b>			
<b>Specific Steps</b>		<b>Responsibility</b>	<b>By When</b>
<b>Date of next session</b>			
<b>Agenda items for next session</b>			

## APPENDIX D: STUDENT SUPERVISION RECORD

<b>Student Name</b>		<b>Student Signature</b>	
<b>Supervisor Name</b>		<b>Supervisor Signature</b>	
<b>Date</b>		<b>Time</b>	
<b>TOPIC</b>	<b>DISCUSSION</b>		<b>OUTCOME</b>

## APPENDIX E: FILE NOTE

A record should be kept of all documentation and communication related to student performance management

- Be specific, factual, objective: include what happened, what was said and outcome
- If practical, ask student to sign and provide them with a copy of the file note

<b>Student Name</b>		<b>Discipline</b>	
<b>Date</b>		<b>Time</b>	
<b>Name and designation of person making file note</b>			
<b>Signature of person making file note</b>			

Record of a:  Phone call  Meeting  Decision  Other

**Persons involved (full names, position and organisation):**

**Background / Discussion:**

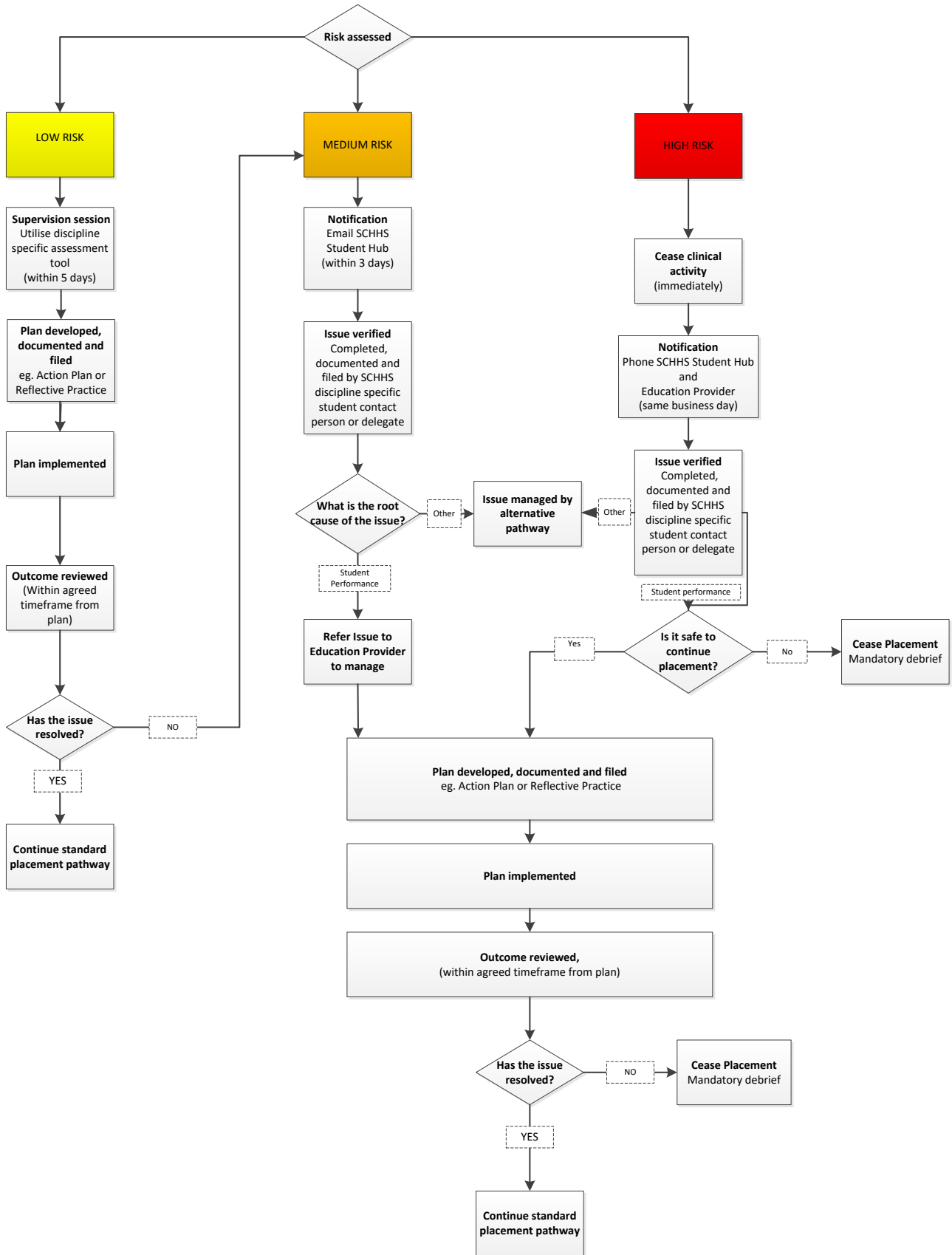
**Action/Outcome**



**APPENDIX F: CHECKLIST OF POTENTIAL FACTORS IMPACTING ON PLACEMENT**

✓/*	Issue	Comments
	General health	
	Hearing / vision	
	Fatigue	
	Travel difficulties	
	Previous history of trauma	
	Child Care	
	Care of other dependents	
	Family commitments	
	Learning difficulties	
	Physical disabilities	
	English as a second language	
	Work commitments outside placement	
	Religious practices e.g. dress, prayer time, Ramadan	
	Meeting required placement hours	
	Clinical performance	
	Professional/behavioral issues	
	Expectation of student/supervisors	
	Environmental issues	
	Other	

## APPENDIX G: STUDENT PLACEMENT PERFORMANCE MANAGEMENT FLOWCHART



**APPENDIX H: STUDENT LOCAL WORK UNIT INDUCTION CHECKLIST**

Student Name:	Supervisor Name:
Date of Orientation:	Placement Area:
Please complete this orientation checklist by the 2nd day of your placement	
<b>Mandatory (Pre Requisites)</b>	
<a href="#">SCHHS Student Minimum Pre-placement Requirements</a> completed and signed – sent in internal mail to Student Placement Hub	
General Evacuation Instructions	
<b>Safety</b>	
Review common risks to safety in the work area and incident prevention (e.g. falls, occupational violence etc.)	
Infection control – hand hygiene and PPE	
Expected scope of practice as a student and when to ask for assistance	
Make sure the student knows how to contact you or the unit as required	
The student's role in an emergency	
<b>Facility Information</b>	
Overview of SCHHS	
Overview of facility and services including 'walk through' of facility, key areas and equipment	
Routine of the unit	
Relevant policies whilst on placement – social media, confidentiality, code of conduct	
Reporting responsibilities (who to report to (including sick))	
Role of Supervisor	
Parking (if applicable)	
<b>Administration</b>	
Relevant manuals, policies guidelines, folders, resources, handouts and documents	
Computer access – Novell access as applicable	
Telephone (outside calls, switch, emergency, internal calls, pager system if applicable)	
Administration (photocopying, mail, faxing, printing)	
Medical Records (confidentiality and documentation standard)	
<b>Placement Information</b>	
Identification and reiteration of scope of practice	
Timetable including contact hours and breaks	
Expected case mix, load and scope of practice	
Placement expectations including organisational values, expected professional behaviour (e.g. punctuality, sickness) placement goals and objectives/assessment requirements	

Identifying when, how and where the student placement assessment/s will occur	
Supervisor expectations (communication, accountability, QH policies)	
Opportunities for debriefing – individual and group – dates/times	
Amount of supervision	
Uniform, hygiene and identification requirements	
<b>Student Information</b>	
Identify student expectations. Ensure they are realistic for the clinical environment and their level of training	
Explore the student's previous clinical experience	
Discuss student's preferred learning style	
Discuss other workload/personal demands outside placement	
Discuss and identify any relative weaknesses and how they can be addressed	
Communication – close the loop, clarify, tone, non-verbal	
Be proactive – seek learning opportunities and optimising experiences - accountability	
Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date:
Student Signature:	Supervisor Signature:

## APPENDIX I: SUPERVISOR/ FACILITATOR FREQUENTLY ASKED QUESTIONS

*What if I have a student who does not arrive at placement on their first day?*

Attempt to make contact with the student. If you are unable to contact the student, please advise the Student Placement Hub who will endeavour to assist you.

*What if my student is sick?*

If a student is sick it is expected that they notify you and the clinical area. Students are also responsible for advising their Education Provider of their absence. Make-up days are negotiable between student, supervisor, Student Placement Hub and the Education Provider.

*What if I have questions regarding clinical skills, assessment, and student's scope of practice?*

Make contact with the Education Provider course coordinator and/or the Student Placement Hub Educators or Discipline Contact Person. It is their role to support you in the supervisor/ facilitator role. The Education Providers will have information regarding scope of practice or clinical assessment.

*What if I am concerned about an underperforming student clinically or professionally?*

At the first signs of a student underperforming you should first talk to the student and highlight your concerns and develop strategies to improve performance. Should the student not improve or the issues are significant follow the reporting process outlined in this document.

*What if my student has an accident or incident on placement?*

If your student is involved in an accident or incident you must follow the same procedure that SCHHS staff follows – ensuring immediate care is provided and completing the correct forms through the RiskMan platform. A debriefing is required, and the supervisor is to ensure the student is involved. The student is responsible for notifying their Education Provider of the incident and completing the required documents from their education institution.

Please remember the Student Placement Hub is available to support you during supervision/facilitation. Please contact them if you need assistance. Early support will benefit both you and the student. The Student Placement Hub [internet webpage](#) has electronic resources available to support your role.

## DEFINITIONS

Term	Definition
Education Provider (EP)	The institution or body who is a part to the Deed of Agreement; and responsible for providing the course or module of study to which the placements relate. Includes all employees, agents and contractors of the Education Provider.
Education Provider Placement Contact Person	The person nominated by the Education Provider for higher level issues in relation to the Deed.
Discipline Contact Person (DCP)	The person described in each Placement Schedule as the Facility Contact Person for all communication and notices between the Department and the Education Provider Placement Contact Person about: <ul style="list-style-type: none"> <li>• Management and administration matters which affect the Facility and its involvement in the placement; and</li> <li>• Other issues arising which impact the Facility's ability to participate in the program</li> </ul> This may be a Nurse Educator, Educator, or other SCHHS representative.
Inappropriate conduct (As per student placement deed)	Notifiable conduct, unsatisfactory conduct, unsatisfactory performance, unprofessional conduct, conduct which breaches the deed or any other matter Queensland Health considers is likely to affect the students or educational providers supervisor's ability to successfully participate in the program
Placement Schedule	A legal requirement of The Deed, which must be completed between a university school (e.g. School of Nursing) and a Queensland Hospital and Health Service (e.g. SCHHS) or facility on a frequent basis. The Schedule serves as a planning and recording document of the placements within the HHS facilities, and once signed, ensures that both parties have agreed to the same placement details.
Pre-placement Requirements	Those requirements which need to be completed prior to commencement of student placement- includes education and immunisation.
Student Placement Hub	SCHHS unit which provides a centralised point of contact, for those both within the SCHHS and external, to enable coordination and guidance for student placements.
Student Minimum Pre-placement Requirements Sheet	A document which outlines discipline specific information (including pre-placement requirements) for a student placement. This is approved by the Student Placement Hub.
Student Placement Deed	An agreement established between an Education Provider (e.g. university or registered training organisation) and Queensland Health, as an overarching strategic legal document covering all legal aspects of student placements.
Supervisor	Within the SCHHS this term is synonymous with: <ul style="list-style-type: none"> <li>• Clinical Facilitator: Nursing</li> <li>• Field Educator: Social Work</li> <li>• Practice Educator/Clinical Educator: Occupational Therapy</li> </ul> A representative on behalf of the Department who is: appropriately qualified, registered and/or credentialed under the Policy and Guidelines to undertake supervision duties in relation to placements; and is nominated in the Placement Schedule as the person responsible for supervising activities undertaken during the placement

## REFERENCES

- Bayley, H, Chambers, R, Donovan, C, 2004. *The good mentoring toolkit for healthcare*. Radcliffe Publishing
- Clinical Education and Training Institute (2011). *The Super Guide a handbook for supervising allied health professionals*. CETI, Sydney.
- Clinical Partnership Program, December 2016. *Practical Guide for Clinical Partner Nurse/Midwife*. State of Queensland (Townsville Hospital and Health Service)
- Dietitians Association of Australia (2015). National Competency Standards. <http://daa.asn.au/wp-content/uploads/2015/12/NCS-Dietitians-Australia-with-guide-1.0.pdf> Speech Pathology Clinical Education Program, November 2016, *Supervision Training and Resource Guide*. State of Queensland (Queensland Health)
- Doran, GT 1981, 'There's a SMART way to write managements goals and objectives', *Management Review*, vol 70, no. 11, (AMA FORUM), pp. 35-36.
- Gibbs, G. (1988) *Learning by doing: A guide to teaching and learning methods*. Further Education Unit, Oxford Brookes University, Oxford.
- Griffith University. (2015). Unsatisfactory Performance, <https://www.griffith.edu.au/health/placement-essentials/your-performance/unsatisfactory-performance>.
- Health education and training institute. *The Learning Guide: a handbook for allied health professionals facilitating learning in the workplace*. Sydney: HETI, 2012.
- Lennon, D, 2005, *Mentoring Training and Support Workbook*, Association for Australian Rural Nurses (AARN)
- Long, A. (2009). Trainees in Difficulty. *Archives of Diseases in Childhood*, 97,7,496.
- Mackay Hospital and Health Service, 2017. *Student Facilitator Orientation Manual*. State of Queensland (Queensland Health)
- Practice Development Unit, Sunshine Coast Hospital and Health Service, (2016) *Effective Questioning Tip* (Queensland Health)
- Practice Development Unit, Sunshine Coast Hospital and Health Service, (2016) *SMART learning objectives Tool*.
- Primary Health Care Research & Information Service, 2009. *Mentoring Matters Fact sheet*. Flinders University
- Queensland Health, *Allied Health Student Health and Wellbeing Resources Allied Health Student Fact Sheet*. Accessed 15<sup>th</sup> November 2019: [https://www.health.qld.gov.au/\\_data/assets/pdf\\_file/0023/722327/health-wellbeing-resources.pdf](https://www.health.qld.gov.au/_data/assets/pdf_file/0023/722327/health-wellbeing-resources.pdf)
- Queensland Health State-Wide Occupational Therapy Clinical Education Program, November 2012. *Occupational Therapy Clinical Educators Handbook*. State of Queensland (Queensland Health)
- Rolfe, A, 2012, *Negotiating A Mentoring Agreement Mentoring Works*, Article 5, Student Placement Deed (version 8)
- Sunshine Coast Hospital and Health Service, 2018. *QHEPS*. State of Queensland (Queensland Health). Accessed 12<sup>th</sup> January 2018: <http://qheps.health.qld.gov.au>
- Synergetic People Development Pty Ltd

Toolkit for supporting students who aren't progressing with clinical competencies (5/07/2016) Erin Cooroy, clinical educator, Nutrition and dietetics.

University of Queensland. (2008). Guide for Practice Educators. Division of Occupational Therapy. St. Lucia: School of Health and Rehabilitation Sciences